1-1-1988

An analysis of the relationship between clinical supervision and situational leadership : the development of a process to increase clinical supervision effectiveness.

Stephen J. Lobban
University of Massachusetts Amherst

AN ANALYSIS OF THE RELATIONSHIP BETWEEN CLINICAL SUPERVISION AND SITUATIONAL LEADERSHIP: THE DEVELOPMENT OF A PROCESS TO INCREASE CLINICAL SUPERVISION EFFECTIVENESS

A Dissertation Presented

by

STEPHEN J. LOBBAN

Submitted to the Graduate School of the
University of Massachusetts in partial
fulfillment of the requirements for the degree of

DOCTOR OF EDUCATION

MAY 1988

EDUCATION

AN ANALYSIS OF THE RELATIONSHIP BETWEEN CLINICAL SUPERVISION AND SITUATIONAL LEADERSHIP: THE DEVELOPMENT OF A PROCESS TO INCREASE CLINICAL SUPERVISION EFFECTIVENESS

A Dissertation Presented

by

STEPHEN J. LOBBAN

Approved as to style and content by:

R. Mason Bunker, Chairperson

William V. Fanslow, Member

Warren Schumacher, Member

George E. Urch, Acting Dean
School of Education

DEDICATION

My Committee:

To R. MASON BUNKER whose patience, direction and support was essential to the completion of this study.

To WILLIAM V. FANSLOW whose support and capacity to simplify complex issues made the completion of this study seem possible.

To WARREN SCHUMACHER whose unique perspective and steadfast encouragement was instrumental in this study's completion.

My Wife:

To LINN whose love, understanding, and management skills provided the foundation for the completion of this work.

My Colleague:

To BERT PEASE whose friendship, loyalty and word processing talents allowed me to complete this study.

ABSTRACT

AN ANALYSIS OF THE RELATIONSHIP BETWEEN CLINICAL SUPERVISION AND SITUATIONAL LEADERSHIP: THE DEVELOPMENT OF A PROCESS TO INCREASE CLINICAL SUPERVISION EFFECTIVENESS

MAY 1988

STEPHEN J. LOBBAN, B.S., WESTFIELD STATE COLLEGE

M.Ed., WESTFIELD STATE COLLEGE

Ed.D., UNIVERSITY OF MASSACHUSETTS

Directed by : Professor R. Mason Bunker

Current Literature documents that problems related to teacher evaluation are very much in evidence today. These problems include inept supervisors and poorly conceived approaches. Improvement of instruction largely remains an intended function of teacher evaluation.

This study investigates the relationship between Clinical Supervision and Situational Leadership theory to discern the potential for improving existing instructional supervision practices. Sixteen (16) supervisors and sixty-six (66) teachers engaged in clinical supervision are

surveyed to identify their perceptions of supervision and leadership effectiveness. Their responses to clinical supervision and situational leadership instrumentation are compared and contrasted using the Spearman Rank-difference Method. In addition, demographic information from each study participant is assimilated into the analysis of data generated by this study.

The results of this study generate several important considerations that provide the basis for development of a process that promotes continuous improvement of instruction by increasing supervisors' clinical supervision effectiveness. These considerations include synchronizing supervisor and teacher perceptions of the supervisor's clinical supervision and leadership effectiveness; recognizing the disireability of supervisor and teacher clincical supervsion and situational leadership training; understanding that years of supervisory experience do not seem to play a major part in shaping teachers' perceptions of clinical supervisors' effectiveness; surveying teacher perception of their supervisor's leadership and clinical supervision effectiveness based on actual experience with that supervisor, and recognizing the almost universal desireability that teachers and supervisors place on supervisors' use of combination of leadership styles.

This study concludes with a presentation of a programatic supervisory process for increasing clinical supervision effectiveness. This process is based on the clinical supervsion and situational leadership relationship presented in the study.

TABLE OF CONTENTS

TABLE OF CONTENTS (continued)

TABLE OF CONTENTS (continued)

APPENDICES

LIST OF TABLES

C H A P T E R I

INTRODUCTION

Background

Problems related to teacher evaluation are very much in evidence today. "Teacher evaluation in current practice is full of problems and struggle for change (Harris, 1986, p. 12)." These current problems are not new. Blumberg (1974) expressed concern that teachers generally viewed supervision as something "to be tolerated but not taken too seriously" (p. 53).

The problems related to teacher evaluation are manifold. Hawley (1982), with rare exception, views teacher evaluation as poorly conceived, poorly executed by inept administrators, and lacking a direct connection with the goals of education. Duke (1984) views teachers as existing largely in schools where their personal and professional needs are insufficiently addressed, making self actualization a virtual impossibility. Harris (1986) tersely describes most current teacher evaluation practices as "perfunctory checking to avoid crisis" (p. 12).

The improvement of current teacher evaluation practices is imperative. "Supervision is critically important, and the future of schooling could well depend upon the adequacy with which supervisory functions are carried out (Anderson, 1982, p. 190)." Improvement of

instruction is universally recognized as an intended function of teacher evaluation programs with principals at all levels overwhelmingly having primary responsibility for teacher evaluation (Robinson, 1979). Principals, then, necessarily become a major ingredient in any teacher evaluation improvement initiative.

There are some established directions for improving current teacher evaluation practices related to improvement of instruction. McGreal (1983) states, "that a positive, supportive relationship between a knowledgeable supervisor and a committed teacher is still the most effective way to produce improved instruction" (p. ix). Harris (1986) additionally asserts that effective teacher evaluation is "a process for guiding the decisions for improving teaching requiring concepts that focus on teaching, knowing, diagnosing, collaboration, and development of people" (p. 12). Duke (1984) strongly endorses an emphasis on collaboration where teachers are directly involved with issues and decisions that directly effect them. McGreal (1983) provides even more specific direction for improved practices. He suggests that school systems begin with the supervisor-teacher relationship "and build backwards from that point" (p. 8). He further suggests that one of the keys to success is found in the supervisor and teacher addressing specific areas of instructional improvement that best fit both school and teacher. These directions for improved teacher evaluation practices clearly emphasize improved instructional

effectivenss through the development of teacher and supervisor. It seems essential that supervisors acquire the requisite skills to meld teachers' personal needs with the needs of the organization if continuous improvement of instruction is to be attained. Supervisors' application of clinical supervision and situational leadership theory may prove useful in effecting necessary improvements in promoting continuous improvement of instruction.

Clincial Supervision is an approach to supervision, defined by Goldhammer (1969) and Cogan (1973), that focuses on observing, analyzing and discussing the events of the classroom. Clinical Supervision attempts to provide the teacher with a positive supervision experience and helps the teacher develop instructional analysis skills. This approach to supervision is designed to promote teacher participation, growth, and development in pursuit of continuous instructional improvement.

Situational Leadership is an approach to leadership, defined by Hersey and Blanchard (1982), based on the premise that there is no one best way for a leader to influence others behavior toward accomplishment of organizational goals in each situation. Situational Leadership Theory advocates that the leader allocate varying combinations of directive and supportive behavior that correspond with the levels of commitment and competence the follower brings to a specifc task. Situational Leadership is designed to facilitate successful accomplishment of organizational tasks through the growth, development and management of human resources.

A common bond between clinical supervision and situational leadership is a commitment to the development of people. This commitment to people is manifested by accomplishment of organizational goals through satisfaction of individual needs. A better understanding of the relationship between these two theories may generate improved supervisory practices that effectively promote continuous improvement of instruction and thereby resolve some of the ills attributed to current teacher evaluation practices.

Purpose of the Study

The purpose of the dissertation will be to undertake an analysis of the relationship between clinical supervision and situational leadership. This analysis will result in a process by which a clinical supervisor may apply situational leadership theory to increase the effectiveness of clinical supervisory experiences for teachers. A review of related current literature, coupled with an analysis of data generated from teacher and supervisor completion of clinical supervision and situational leadership assessment tools will serve as the foundation of this process. This process, to be developed, will be an attempt to help supervisors understand the theoretical relationship that exists between situational leadership and clinical supervision theory. This process will also provide guidelines on how to use the assessment tools in the study, how to interpret related results, and how to use the results to increase the effectiveness of clinical supervision experiences for teachers.

The beginnings of clinical supervision are rooted in the Harvard/Newton program that was conducted in the summer of 1955 (Goldhammer, Anderson & Krajewski 1980). The intent of Morris Cogan and his colleagues, was to provide college graduates, without teacher training, with supervision and instruction in teaching. The program participants worked in groups of 4-5 under the supervision of a master teacher.

The subsequent books by Morris Cogan (1973) and Robert Goldhammer (1969) that evolved from the aforementioned experiences, provide the basis for the current clinical approach to supervision.

Cogan's Model

Cogan (1973) described clinical supervision as consisting of eight phases. "Phase 1. Establishing the teacher-supervisor relationship" (p.10) entails providing the teacher with an orientation to clinical supervision including defining respective roles and responsibilities. "Phase 2. Planning with the teacher" (p.11) includes development and/or review of lesson or unit plans with particular emphasis on specifying learning outcomes and related instructional strategies. "Phase 3. Planning the strategy of observation" (p. 11) establishes the specific arrangements for the observation of instruction (e.g. time, data to be gathered). "Phase 4. Observing Instruction" (p. 11) is simply the observation and recording of events in the classroom. "Phase 5. Analyzing the teaching-learning processes" (p. 11) involves an

analysis of the instruction observed and recorded in the classroom setting. "Phase 6. Planning the strategy of the conference" (p. 11) encompasses establishing the focus and determining the respective teacher/supervisor responsibilities for the conference. "Phase 7. The conference" (p. 11) provides the opportunity to review the instruction observed with particular emphasis on identifying instructional practices that facilitated accomplishment of specified learning outcomes and identifing any instructional practices that inhibited accomplishment of these learning outcomes. "Phase 8. Renewed planning"(p. 12) focuses on targeting desired changes in teacher behavior and initiating the next supervision cycle.

Generally, Cogan's (1973) model of Clinical Supervision attempts to provide the teacher with positive feelings toward supervision (p. 58), helps to develop teacher understanding of the importance of making instructional outcomes consistent with intents (p. 164), and most importantly, attempts to help the teacher develop the skills necessary to perform perform analysis of instruction individually. (p. 198).

Goldhammer's Model

Goldhammer's (1969) clinical supervision model consists of five stages. "Stage 1. Preobservation conference" (p. 57) is the planning stage of his model where instructional intents, procedures and specific interests are established by the teacher and supervisor.

"Stage 2. Observation" (p. 57) provides for the supervisor's observation of instruction and recording of related events in the classroom setting. "Stage 3. Analysis and Strategy" (p. 57) entails a review of recorded events, identification of teacher behavior patterns that related to specified instructional intents and a prioritization of topics for discussion at the conference. "Stage 4. Supervision Conference" (p. 57) provides the means to review teacher behavior patterns that facilitated accomplishment of instructional intents as well as behaviors that inhibited accomplishment of these intents. Selection of issues for discussion is determined by the confidence level of the teacher with an expressed emphasis on providing the teacher with a positive supervisory experience. Stage 5. Post conference analysis" (p. 57) gives the teacher and any other supervision team participants an opportunity to provide the supervisor with performance feedback to facilitate the supervisor's growth, skill development and sensitivity to being supervised.

The Challenge

The obstacles to widespread application of Goldhammer's and Cogan's models of clinical supervision remain significant. Reavis (1978, pp. 580-584) concludes that teachers clearly favor the clinical supervision approach, yet points out the fact that clinical supervision is not widely accepted. Anderson and Krajewski (1980) confirm the challenge in stating "even today ideas

and practices associated with clinical supervision are insufficiently known and appreciated" (p. 420).

The need for addressing organizational antecedents that impact the practice of clinical supervision is clearly documented in current literature. McFaul and Cooper (1984) in addressing the implications of their attempt at implementing clinical supervision caution "that clinical supervision, whether performed by administrators or peers, needs to be thoroughly integrated into the life of the school, a rather unlikely possibility unless many typical school structures and procedures are modified" (pp. 8-9). They concluded that fields, other than those examined in their study, should be reviewed to discern attributes that may facilitate the future practice of clinical supervision.

Understanding and application of Hersey and Blanchard's situational leadership model may provide the means to enhance the implementation of clinical supervision by addressing some of the organizational and individual variables that impact the theory and practice of clinical supervision.

More specifically, clinical supervision is an approach to supervision with the primary goal of promoting the continuous improvement of instruction. Accomplishing the task of continuous improvement of instruction is extremely important to the organizational effectiveness of a school system. Application of clinical supervisory practices is an attempt to accomplish this task through

the development of the teacher's skills and related commitment to become a knowledgeable, active participant in this process.

Situational leadership theory provides a methodology to assimilate individual needs and organizational needs. It does this by addressing basic human needs and helping individuals develop the skills and commitment necessary to accomplish tasks of organizational importance. Situational leadership seems, then, to be one of the fields that needs to be explored to determine the extent to which its understanding and application may facilitate future clinical supervision practices.

Situational Leadership

The basic premise of Hersey and Blanchard's situational leadership model is that there is no one best way for a leader to influence follower behavior toward accomplishment of organizational goals. Their model serves as a construct for matching an appropriate leadership style to the maturity of the follower.

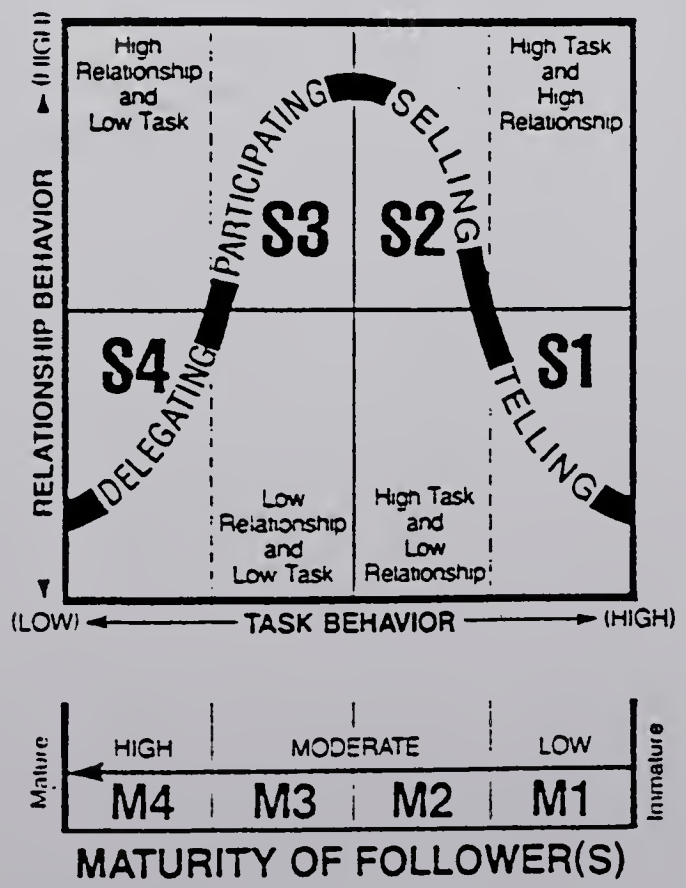
The maturity of the follower is task specific. Task specific maturity is a combination of the follower's ability (competence) and willingness (motivation) to perform the task at hand. The four maturity levels as described by Hersey and Blanchard (1982) are described as follows:

> M1 (Low Maturity) - unable and unwilling or insecure; M2 (Low to Moderate Maturity) - unable but willing or confident; M3 (Moderate to High Maturity) - able but unwilling or insecure; M4 (High Maturity) able/competent and willing/confident. (p. 154)

The four leadership styles "Telling" (S1), "Selling" (S2), "Participating" (S3), and "Delegating" (S4), represent combinations of task and relationship behavior. Task behavior is "the extent to which people are told what to do, when to do it, and how to do it" (Hersey & Blanchard, 1982, p. 152). Relationship behavior represents "the extent to which a leader engages in two way communication with people: providing support, encouragement, psychological strokes, and facilitating behaviors" (Hersey & Blanchard, 1982, p. 152).

The relationship between follower maturity and leader style is shown in Table I (Hersey & Blanchard, 1982, p. 152).

TABLE 1
STYLE OF LEADER



Application of the situational leadership model as depicted in Table 1 requires the leader's accurate assessment of the follower's task specific maturity and corresponding use of appropriate task and relationship behaviors. More specifically, as the follower's task specific maturity increases the leader's application of task and relationship behaviors are accordingly varied. The leader's successful application of the situational leadership model is marked by steadily increasing follower maturity and resultant success in accomplishment of organizational goals like improvement of instruction.

The Theoretical Relationship

A strong theoretical relationship exists between the clinical supervision and situational leadership models. Both of these models are constructs offered to accomplish organizational goals through the effective utilization of human resources. In an organizational sense, when applied to an educational setting, the goal of both of these models is maximized student mastery of identified learning outcomes through the continuous improvement of instruction.

The essence of the situational leadership model is application of a leadership style that most closely matches the follower's task specific maturity. Theoretically, the closer the match between maturity and style, the greater the probability for success in accomplishing the task at hand. Clearly, the supervisor's

skill in matching leadership style to the follower's task specific maturity is the key component in the situational leadership model.

The clinical supervision model embodies Hersey and Blanchard's conceptualization of task specific maturity. The goal of clinical supervision is for the supervisor to help teachers become independent in the analysis of instructional effectiveness and thereby make provision for continuous improvement of instruction. The intent of teachers moving from dependence to independence in pursuit of this goals correlates with the situational leadership premise that task specific maturity (ability and willingness to perform a task) can be increased through the leader's (supervisor's) application of corresponding relationship and task behaviors. The belief that people, with the necessary support and direction, can grow in maturity and independence in pursuit of organizational goals represents a common theoretical bond for the clinical supervision and situational leadership models.

Both clinical supervision and situational leadership are individualized methods of working toward accomplishment of organizational goals through satisfaction of individual needs. In the case of situational leadership these needs are defined in terms of task specific maturity. Correspondingly the spectrum of task specific maturity, from low to high, illustrates the need to individualize leadership styles. Similarly, Cogan suggests that instructional patterns which would serve as

the focus for analysis be selected based on the teacher's ability to bring about the desired change effectively. In a similar vein, Goldhammer suggests that selection of issues for change be selected based on the teacher's ability to bring about the desired change effectively. Hersey and Blanchard's task specific maturity, coupled with Cogan and Goldhammer's emphasis on selecting issues for change based on an individual's capacity to effect that change, similarly illustrates the degree of individualization that clinical supervision and situational leadership provide.

It naturally follows that the demands for flexibility on the leader in situational leadership, and on the supervisor in clinical supervision are significant. The related theoretical assumption common to both these models is that the leader attempting to influence another's behavior adjusts his/her style to the needs of the individual, in relationship to the task at hand. The degree of leader or supervisor success in correspondingly individualizing his/her approach in terms of task and relationship behavior corresponds to the probability of success in attaining the established goal. The common theoretical assumption herein lies in the belief that the leader (situational leadership) or supervisor (clinical supervision) can successfully adapt his/her style to correspond to individual needs and related task specific maturity.

McGregor's (1960) assumptions about human nature are basic to the theoretical constructs of both the clinical supervision and situational leadership models. McGregor's assumptions about human nature were grouped into categories termed X and Y. The X category assumptions basically viewed people as lacking a work ethic, basically motivated at the physiological level and universally needing close control and supervision. The Y category assumptions, in contrast, basically viewed people as having the capacity to truly enjoy their work under favorable conditions, being motivated at the self actualization as well as physiological levels and having the capacity for self direction if appropriately motivated.

McGregor's Y assumptions about human nature have special importance to both the situational leadership and clinical supervision models. The key Y assumption - that people can become self directed and creative in accomplishing organizational goals if properly motivated - is relevant to both models. This Y assumption about human nature is basic to the pursuit of increasing staff task specific maturity in the situational leadership model and of moving from dependence to independence in the evaluation of instructional effectiveness in the clinical supervision model. The supervisors or leaders, as well as the organizations they function within, must make provision for assimilation of Y assumptions about human nature for successful application of either model. In

contrast, X only assumptions about human nature - the premise that people prefer to be directed and have little desire for responsibility - held by an individual supervisor or leader would negate opportunities to increase task specific maturity and correspondingly foster dependency in, or negative attitudes toward, developing instructional analysis skills.

The need to bring the situational leadership and clincial supervision models together, in order to help increase teacher effectiveness is apparent. The purpose of this dissertation is to establish a process to help supervisors acquire information about their situational leadership and clinical supervision skills, and to use that information to increase their effectiveness as clinical supervisors. The uniqueness of this initiative lies in bringing these two theories together in a manner not previously undertaken. The worth of this study lies in its potential contribution to promote continuous and effective improvement of instruction in teachers and related student mastery of desired learning outcomes.

Methodological Approach to The Problem

The methodology to achieve the purpose of the study has two components.

The first component entails development of evidence that defines the theoretical and practical application relationships existing between situational leadership and clinical supervision theory. This evidence will be articulated through a review of related literature and from data derived from assessment tools administered to

supervisors and teachers currently engaged in clinical supervision. The Canizaro Self Evaluation Instrument (CSEI) will be used to gather clinical supervision data. The Leader Behavior Analysis II (LBA II) instrument will be used to gather situational leadership data. In addition, a profile sheet will be used to gather related demographic information. Statistical correlations from these two instruments a review of the demographic data and related supplemental analysis will be used to define the extent to which effective application of situational leadership by clinical supervisors increases teachers' perceptions of the effectiveness of clinical supervision.

The second component will result in the development of guidelines to help supervisors increase clinical supervision effectiveness through the application of situational leadership theory. These proposed guidelines would be presented in four phases that anticipate the following questions:

1. What is the relationship between clinical supervision and situational leadership?
2. How can I assess perceptions of myself as a clinical supervisor and situational leader?
3. What do the results of the assessments mean?
4. What are my next steps to develop the competencies I need?

Research Hypotheses

The research design for this study was developed to address the following hypotheses:

Hypothesis I: There is a statistically significant relationship between teacher and supervisor responses to the CSEI.

Hypothesis II: There is a statistically significant relationship between teacher Style Effectiveness rating of supervisors and supervisor self-rating of Style Effectiveness as measured by responses to respective forms of the LBA II.

Hypothesis III: There is a statistically significant relationship between teacher perception of effective clinical supervision experiences as measured by the average score of their responses to the CSEI and the teacher Style Effectiveness rating of their supervisor as measured by responses to the LBA II-Other.

Hypothesis IV: There is a statistically significant relationship between supervisor perception of effective clinical supervision experiences as measured by the average scores of their responses to the CSEI and their Style Effectiveness rating as measured by their responses to the LBA II-Self.

Significance of the Study

This study will contribute to a more fully developed theory of supervision that provides a specific professional development approach for supervisors. Lovell and Wiles (1983) document the importance of this pursuit in the following statement. "In our review of the literature we did not find a fully developed theory of supervision that would provide specific direction for supervisors (p. 15)." To the best of this researcher's knowledge no similar initiative has been undertaken to link the situational leadership and clinical supervision models in an effort to maximize the effectiveness of clinical supervision experiences for teachers. This study will contribute a process that aims to increase supervisors' ability to promote the continuous improvement of instruction.

Limitations of the Study

The results of this study will be limited in the following ways:

1. The items of the LBA II are not specific to an educational or school setting. Applicability to an educational setting is drawn from the content of the items.
2. The CSEI was not designed to correlate exclusively with clinical supervision. Although documentation for the instrument is replete with clinical supervision references application of its content has

been determined by the researcher to correlate with effective clinical supervision practices.

3. Cross validation between the LBA II and CSEI has not been established. Analysis of the results of this study may contribute to documentation of any cross validation that exists between the two instruments.
4. This study does not explicity assess the maturity or developmental levels of teachers. An analysis of teacher and supervisor developmental levels may prove useful as a future area of study.
5. An individual analysis of all six clusters defined within the CSEI is beyond the necessary scope of this study. Future research in this area may prove useful in complimenting the results of this study.
6. The population included in this study is too limited to establish conclusions generalized to the entire population. Follow-up studies that serve to effectively broaden the base of this study may facilitate generalizing the results to other populations.

Outline of Subsequent Chapters

Chapter II presents a review of current literature pertaining to clinical supervision and situational leadership theory. The literature is summarized as it relates to the proposed analysis of the relationship between clinical supervision and situational leadership and to the development of a process which increases clinical supervision effectivness.

The research design is defined in Chapter III. In this chapter, important terms are defined, methodology and hypotheses are stated, participants are described, data collection is explained and instrumentation is described.

Chapter IV is an analysis of the data collected including a report of the results, a review of the methodology used and a summary of data most significant to the stated research hypotheses.

This study concludes with Chapter V which provides a summary of the situational leadership/clinical supervision theoretical relationship as well as guidelines to assist supervisors in gathering and interpreting relevant data and acquiring related competencies. Recommendations related to the literature and research as well as suggestions for further research are also included in this chapter.

C H A P T E R . I I

REVIEW OF THE LITERATURE

Introduction

In the previous chapter, it was suggested that coupling clinical supervision and situational leadership theory may prove useful in addressing some of the problems that currently deter efforts to continuously improve instructional practices. Chapter II presents literature that supports this premise. Harris (1986) supports this initiative by encouraging development of a multi-dimensional process that promotes "effective developmental evaluation" (p.198). More specifically, this chapter will present a review of literature that explicates the precepts basic to clinical supervision and situational leadership as individual theories.

In addition, literature that supports the notion of coupling the two theories into a process to increase clinical supervisors' effectiveness will also be reviewed. McGreal (1983) suggests,

> Pulling out of certain clinical supervision techniques or altering them to fit current conditions does not deny the effort that went into their development. But it is necessary to reshape the techniques into practices that can meet the demands of the contemporary supervisor [italics added]. (pp. 97-98)

The needs of the contemporary supervisor revolve around "the proposition that there is no best style of leadership and that successful leaders are those who can adapt to the

needs of the staff and to the situations peculiar to the school" (Deakin, 1986, p.165). "Environments have changing characteristics" (Kelly, 1980, p.33) that require the application of varying leadership styles to facilitate the improvement of learning. "The instructional leader must match the strategies and specific behaviors to the mission, the context and the climate of a particular school (Daffenbaugh, 1983 p.8)."

Clinical Supervision

Overview

More than three decades have lapsed since the inception of clinical supervision at the Harvard/Newton summer project in 1955 (Goldhammer, Anderson & Krajewski, 1980). Goldhammer (1969) and Cogan's (1973) books have served as the primary means of articulating clinical supervision theory. Goldhammer, Anderson and Krajewski (1980) "claim that there are no major differences in the cycle of supervision as described by the two authors" (p. 32).

Nearly ten years ago there was not an expansive amount of research documenting the effectiveness of clinical supervision. Mattaliano's (1977) review of applicable current literature generated just five major studies - Goldhammer in 1962, (p. 105); Weller in 1971, (p. 105); Garman in 1971, (p. 106); Eaker in 1972 (p. 106); and Price in 1975 (p. 107).

A review of Weller's (1971) book, Verbal Communication in Instructional Supervision, supports Mattaliano's (1977) suggestion that Weller's work holds "potential for becoming a method useful in the further study of instructional supervision" (p. 105). Weller documented the effectiveness of the supervisory conference as a vehicle to focus almost exclusively on analysis of instruction and suggested the related potential to effect instructional improvements. McGreal (1983) amplifies the significance of Weller's (1971) assessment: "In many respects, the introduction of a narrowed focus on teaching and the continuing education of the staff in instructional skills is the single most important aspect of building a successful evaluation/supervision system (p.72)".

Noreen Garman (1982) provides a link in acquiring a perspective on the past and present state of clinical supervision. She chronologically traces the evolution and effectiveness of the practice of clinical supervision following Cogan and Goldhammer's initiatives. She writes,

> In 1972, Lewis and Meil devoted one page to the nascent field in Supervison of Improved Instruction; Mosher and Purpel in Supervision: The Reluctant Profession devoted one chapter. In 1976 The Journal of Research and Development in Education featured as its central theme Clinical Supervision as did Contemporary Education in 1977. (p. 36)

Garman completes her evolutionary analysis by citing the works of Goldhammer, Anderson and Krajewski (1980), Sullivan (1980) and Reavis (1978) in stating: "By 1980 bibliographies reflected the state of the art" (p. 36) and

based on the work of Reavis (1978) concludes that this research has demonstrated that clinical supervision works.

The potential clinical supervision has to promote continuous improvement of instruction has continued to be documented in the works of McGreal (1983), Lovell and Wiles (1983), and Harris (1986) . McGreal (1983) states, "there is sufficient evidence to indicate the effectiveness of clinical supervision" (p. 29) as a supervision model. Lovell and Wiles (1983) conclude "that clinical supervision as developed by Cogan (1973), Goldhammer, Anderson and Krajewski (1980), and others is an excellent approach" (p.168) for the delivery of services to help teachers improve their performance. Finally, Harris (1986) includes clinical supervision among the "basic principles" (pp. 34-35) of teacher evaluation systems designed to improve instructional effectiveness.

Key Variables

The literature yields three variables that have major impact on clinical supervision practice. These three variables are: (1) organizational commitment to the development of human resources; (2) the teacher-supervisor relationship; and (3) supervisor competency. Literature that explicates the significance of these variables will be presented in the context of this chapter.

A school system's commitment to the development of human resources is a prerequisite for effective clinical supervision practice. The belief that people have the capacity to grow and develop - and the willingness to

promote that development - is basic to the practice of clinical supervision. Goldhammer, Krajewski and Anderson's (1980) description of the conceptual background of clinical supervision explicates the importance of "combining school and personal needs ... and commitment for growth" (p. 26). In addition, Lovell and Wiles (1983) articulate educational organizations' responsibility in stating, that its members "have a readiness for professional growth that should be recognized, utilized and - it is hoped - maintained throughout professional practice" (p. 185). In summary, the environment required for clincial supervision is one that promotes the growth and development of teachers and supervisors as they work to promote the growth and development of their students.

The teacher-supervisor relationship is the second major variable that impacts clinical supervision practice. The intricacies of the teacher-supervisor relationship are manifold.

The significance of the teacher-supervisor relationship can be better understood through delineation of the important components in that relationship. Rapport between the teacher and supervisor is an important factor in the teacher-supervisor relationship. "Rapport suggests positive feelings between people and it reflects the fact that people get along well together (Goldhammer, Anderson & Krajewski, 1980, p. 47)" These authors indicate that "Motivation" (p. 49) and "a positive view of self" (p. 49)

for teacher and supervisor are also prerequistes for an effective working relationship. The teacher-supervisor relationship is significantly impacted by a common commitment to continuous improvement of instruction. Cogan (1973) terms this common commitment "collegueship" (p. 68) - a working relationship where "dissimilar and unequal competencies" (p. 68) are combined to promote continuous improvement of instruction.

In addtion to rapport, motivation, postive view of self, and a common commitment to continuous improvement of instruction, an understanding of effective teaching practice is a necessary common reference point in the teacher-supervisor relationship. If, as Goldhammer, Anderson and Krajewski (1980) suggest, clinical supervision is to serve as "a technology for improving instruction" (p. 26) the teacher and supervisor need to have a clear conceptualization of instructional effectiveness.

Hunter's (1980) conceptualization of an instructional effectiveness model has emerged from the current body of teacher effectiveness research. This instructional model delineates teacher behaviors that have proven effective in promoting student learning. Hunter's nine step instructional model - 1. diagnosing student needs 2. specifying related objectives 3. developing learner readiness 4. establishing relevance of that to be learned to previous and future learnings 5. selecting activities to accomplish objectives 6. visually and verbally

demonstrating the product or process to be attained 7. ascertaining learner mastery 8. guiding practice 9. providing independent practice - provides an extremely useful tool in guiding the teacher and supervisor's pursuit of continuous instructional improvement.

Similarly, Brookover et al. (1982) found Bloom's (1978) conceptualization of Mastery Learning particularly useful on defining teaching pedagogy that could be replicated with predictive instructional effectiveness. The mastery learning approach to instruction includes the teacher belief that all students can learn, and a teach-test-reteach cycle that requires students to meet an established mastery standard before they receive instruction on the next sequential skill. This method of teaching places instructional emphasis on both what students are taught and on what they have learned-allowing more students to attain higher levels of achievement.

Brookover (1982), and Hunter's (1980) work in the area of instructional effectiveness provide the teacher and supervisor with a ready reference for identifying effective teaching practices.

Teacher-supervisor rapport, motivation, positive view of self, commitment to continuous improvement of instruction and common conceptualization of effective teaching become the foundation for understanding the clinical supervision process.Goldhammer, Anderson and Krajewski (1980) state,

> Before this process will work efficiently ... the concept must first be accepted by teachers and supervisors so they are not only aware of it, but understand why clinical supervision exists and so that they are motivated to continue using, improving and evlauating the method. (p. 3)

An understanding of the clinical supervision process is based on the premise that "the proper subject of supervision is the teacher's classroom behavior, not the teacher as a person" (Cogan, 1973, p. 58). Cogan further states that goals of clinical supervision cannot be realized "(1) until the teacher knows why he is changing his behavior, (2) wants to change it, and (3) derives professional satisfaction from doing so" (p. 58).

In the teacher-supervisor relationship it is imperative that the teacher learns "that the supervisory program is his, not the supervisor's" (Cogan, 1973, p. 93). The shared process understandings of a focus on teacher classroom behavior, shared ownership of the supervisory program, and professional satisfaction derived from improved instructional effectiveness significantly effect the goal of clinical supervision - "the development of the professionally responsible teacher who is analytical in his own performance, open to help from others, and withal self-directing" (Cogan, 1973, p. 12).

The combination of rapport, motivation, postive view of self, commitment to continuous improvement of instruction, conceptualization of effective teacher practices, and understanding the clinical supervision process represent the key components in the teacher-supervisor relationship.

The third major variable that impacts clinical supervision is supervisor competency. There are several basic competencies required to be an effective clinical supervisor.

The clinical supervisor must first have competency as an instructional supervisor. "Instructional supervision is supervision from the viewpoint of the teacher (Canizaro, 1985, pp. 167-168)." "The instructional supervisor develops an environment where students, teachers, and supervisors grow" (Canizaro, p. 62) and discover personal meaning in their learning (Coombs, Avila & Purkey, 1985). The instructional supervisor's understanding of self-learning theory is a prerequisite to establishing this environment. Bunker's (1977) assumptions on self-learning suggest that people have the capacity to grow and develop and do so most effectively in an environment that is supportive and focuses on an indivdual's strengths. These assumptions guide the supervisor's efforts to help teachers achieve independence in the analysis of instruction. These instructional supervision understandings provide the foundation for supervisor acquistion of more specific clinical supervision skills.

Mattaliano (1977) defines the arena of the clinical supervisor and identifies ten related competency "Skill Clusters"(p. 112). Mattaliano (1977) defines the arena by attesting "to the fact that clinical supervision requires not only a high degree of commitment on the part of the

supervisor, but some extra human resources and a great deal of organizational and personal flexibility" (p. 85).

Skill Clusters #4-10 define competencies specific to each phase of the cycle of supervision. Skill clusters #1, #2 and #3 impact all aspects of clinical supervision practice and therefore merit detailed explication.

Skill Cluster #1 is "pertinent to the supervisor's self" (Mattaliano, 1977, p. 113). The essential supervisory competencies in this Cluster include: knowledge of one's own strenths, weaknesses and perceptions; regulating one's own anxieties; identifying and working in the teacher's frame of reference; varying the approaches used with teachers; and balancing task and relationship behaviors in problem solving.

Skill Cluster #2 is "pertinent to developing the teacher's autonomy" (p. 115). The essential supervisory competencies in this cluster include: providing resources to help improve the teacher's work; working collegially in promoting the teacher's instructional self analysis skills; developing trust; helping the teachers understand the major factors effecting their teaching; and helping the teacher become a practioner of clinical supervision.

Skill Cluster #3 entails development of teacher readiness for clinical supervision. The essential supervisory competencies in this area include: helping the teacher to see supervision in a positive light; helping the teacher understand the teacher-supervisor

relationship; knowing the teacher's personality, values and educational background; helping the teacher recognize the importance of exchanging diverse views; providing support and direction for the teacher to continuously improve instructional effectiveness.

Acheson and Gall (1980) developed thirty-two (32) techniques that compliment Mattaliano's (1977) delineation of supervisory competencies. These techniques represent practical methodologies the supervisor may employ in the clinical supervision of teachers. The methodologies suggested focus on classroom observation and conferencing. The methodologies related to classroom observation, provide techniques that generate instructionally important information about student and teacher classroom behavior through the use of checklists, interaction analysis and video and audio recording. The methodologies related to conferencing, suggest techniques that provide a focus appropriate for a particular teacher (e.g. identify teacher concerns, identify instructional improvement procedures) and reinforce postive teacher feelings about themselves and their work.

Valverde (1982) identifies an additional essential clinical supervisor prerequisite - the need to engage in self-learning. Valverde (1982) cites Bunker's (1977) assumptions on self learning and postulates that supervisors should be their own instruments for professional growth. The self-learning activities

suggested by Valverde include self evaluation of effectiveness, gathering information "to validate or dispel faulty perceptions" (p. 86), seeking new ideas that motivate, and applying new knowledge to perform tasks in new ways.

It can be readily deduced from the literature that supervisor competence ultimately determines the effectiveness of the clinical supervision the teacher experiences.

Application Challenge

In as much as the major variables - 1. organizational commitment to the development of human resources 2. the teacher-supervisor relationship 3. supervisor competency - that impact clincial supervision can be defined, limitations to the practice of clinical supervision remain. Lovell and Wiles (1983) "pitfalls in the delivery of clinical supervision" (pp. 181-182) include supervisors' lacking: the requsite skills and understandings; individualized approaches based on individual teacher needs; a basis of mutual trust; and the inclusion of teacher feedback and perceptions. Goldhammer, Anderson and Krajewski (1980) concur in stating that clinical supervision "has not yet been the force in education that it should and could be" (p. 190). Goldhammer, Anderson and Krajewski express further concern about "serious questions" (p. 207) that exist regarding the growth and development of clinical supervisors in

school settings. They encourage endeavors in the field of education that refine and create "training and administrative models for the future" (p.207). This study's analysis of the relationship between clinical supervision and situational leadership is an effort to develop just such a process to increase clinical supervision effectiveness in response to these stated limitations.

Connecting Literature

Literature explicitly connecting clinical supervision and situational leadership theory as prescribed in this study is virtually non-existent. However, the literature does implicitly support the merits of coupling the two theories in a process to increase clinical supervison effectiveness as proposed in this study.

Canizaro (1985) articulates the importance of leadership for the effective instructional supervisor. She writes,

> Leadership, emcom-
> passes group skills,
> understanding about the change pro-
> cess and the school as organization,
> the ability to set goals and adapt
> work with individual teachers to
> their particular needs [italics
> added]. Leadership skills are
> essential for the instructional
> supervisor. (p. 61)

Sergiovanni and Starratt (1979) similarly articulate the need for supervisors to be situational.

> Human resources supervision recognizes
> that forces in the client may require
> the supervision to behave in a variety
> of ways [italics added]. Highly depen-

> dent teachers may well need paternalistic supervisory environments, and uncommitted students will require closely controlled supervisory environments. Human resources supervisors, however, are not resigned to these patterns in that they do not accept dependency in teachers as being natural or inherent [italics added]. Dependency of teachers and lack of commitment of students are perceived as symptoms of client immaturity and/or perhaps supervisory immaturity and organizational immaturity. With this perception, the human resources supervisor works to diminish client dependency and to increase client commitment, for in the synthesizing theory, these are important means to affect the school effectiveness variables positively. (p. 31)

A related predecessor to Sergiovanni and Starratt's (1979) human resources supervision was Sergiovanni and Carver's (1973) work in promoting optimum growth and development for all who come in contact with the school. These authors encouraged attainment of this goal through practical application of a theory of human motivation based on Third Force psychology. "According to this view, one's visions and goals, hopes and aspirations are the prime movers of man - not one's fears, doubts, and hates - or what one can get for the moment in a stimulus - response interchange (p. 56)."

Sergiovanni and Carver's (Ibid) suggestions for practical application of the related theory of motivation includes consideration of teacher's hierarchical needs (pp. 57-63), job satisfaction (pp. 69-86) and work context (pp. 145-148). Teachers' hierarchical needs are addressed according to Maslow's hierarchy of human needs; their job

satisfaction through Herzberg's Motivation-Hygiene Theory; and their work context through Argyris'work on potentially conflicting organizational demands and individual needs for self actualization.

Glickman (1981) reiterates the organizational importance of schools promoting both adult and student growth. In order to accomplish this goal, he contends that "what is known about [adult] learning, individual differences, and teachers lead to the strong premise that effective supervision must be based on orientations of supervision with the individual needs and characteristics of teachers" (p. 40). This premise is advanced in the form of a teacher paradigm based on the "developmental variables" (p. 47) of commitment and capacity for abstract thinking. Glickman (1981) derives from this paradigm a notion of "developmental" (p. 49) supervision where "the supervisor's goal is always to decrease those behaviors that give the supervisor control over improvement of instruction and to increase those behaviors that ultimately enable the teacher to be the controller of his or her own environment" (p. 50).

Support for situationally varied leadership is additionally garnered from Dwyer's (1984) three year study of 42 principals who were identified as successful instructional leaders. These principals were varied in age, gender and experience and their schools were varied

in size, location, and socioeconomic status. Dwyer states, "We found no single image or simple formula for successful instructional leadership" (p. 33). Outcomes from this study indicate that "perhaps the most important lesson from our work with principals has been the recognition of the diversity of approaches to successful instructional management" (p. 37).

DeBevoise (1984) adds credence to Dwyer's (1984) notion of no simple formula for success in sythesizing research on the principal as instructional leader. DeBevoise states, "Perhaps the important lesson to be learned from an examination of the characteristics of effective principals relevant to instructional leadership is the diversity of styles that appear to work" (p.17).

Hunter (1980) effectively articulates the importance of using a diversity of leadership styles specific to supervision conferences. Hunter defined a six phase organizational structure to help supervisors adapt to the developmental needs of teachers related to analysis of instruction and professional growth and development. This structure requires that supervisors provide varying amounts of directive and supportive behavior to promote the teacher's growth and development. Blanchard, Zigarmi and Zigarmi (1987) confirm the merits of Hunter's initiative in concluding that "school leaders need to provide their people with what they can't do for themselves <u>at the present moment</u> [italics added]" (p.8).

The issue of accomodating teachers' varied growth needs and learning styles is complex. Glatthorn's (1984) conceptualization of Differentiated Supervision recognizes teachers as "complex individuals" (p.4) whose growth and independence require individualized supervisory approaches where supportive and directive supervisory behaviors are varied based on the current needs of the teacher. Differentiated Supervision advances clinical supervision as a viable supervisory approach if applied in a situationally appropriate manner consistent with the development needs of the teacher. In addition, Scafidel (1982) adds to the complexity of the issue by identifying teacher perceptions of leadership style as important in facilitating their increased instructional effectiveness.

The current literature establishing leadership as a major force in accomplishing the organization's desired outcomes serves to reinforce the importance of the principal's application of situational leadership. In an educational context, the desired organizational outcome becomes student attainment of desired learning outcomes. Robinson (1985) explicates the importance of the principal's leadership role in citing elements common to effective schools based on an analysis of effective schools research. He writes,

> A school's effectiveness in the promotion of student learning was found to be the product of a building-wide, unified effort which depended upon the exercise of leadership. <u>Most often research depicted the building principal as the key person providing leadership to the school</u> [italics added]. (p. 7)

Sergiovanni (1984) similarly references the school effectiveness literature in suggesting that successful schools seem to benefit from a "combination of tight structure around clear and explicit themes, which represent the core of the schools culture and of automony for people to pursue those themes in ways that made sense for them" (p.13). Deakin (1986) reiterates the importance of using leadership styles that adapt to varying situations if school improvement efforts are to succeed.

Andrews (1987) has suggested that teacher perceptions of their principal's leadership plays an important part in student achievement. Andrews posits "that where teachers have very positive perceptions of the quality of their work place, they are more productive, so we see incremental growth in student achievement" (p. 10).

In addition, Peters and Waterman (1984) offer an educationally applicable perspective in articulating the importance of effective leadership. They point out "that the [best run] companies are truly unusual in the ability to achieve extraordinary results through ordinary people" (p. 239). The desireability of achieving extraordinary results is common to both industrial and educational environments. Peters and Waterman (1984) state that "attention to employees....has the dominant impact on productivity" (p 6), and that we [people in general] like to think of ourselves as winners" (p. 57). Systems that are designed to "provide lots of winners....[and]

constructed to celebrate the winning once it occurs" (Peters and Waterman, 1984, p. 58) were seen as most effective.

The potential worth of analyzing the relationship between these two theories and deriving a related process for their complimentary use can be readily deduced from the literature. DeBevoise (1984) lends support to this position in citing that which has been accomplished and that which needs to be accomplished,

> Recent research on the principal emphasizés the variation possible in providing instructional leadership. Beyond lists of desirable characteristics and essential functions, <u>there is a growing awareness of the complexity and uniqueness of each principal's situation</u> [italics added], which dictates an idiosyncratic blend of the desirable and the possible. Research should help principals evaluate their own strengths and weaknesses and the constraints and opportunities posed by their environment. (p. 20).

Rogers (1961) work implicitly illustrates the worth in developing a process coupling situational leadership and clinical supervision. Rogers emphasizes the importance of perceptions, trust, joint exploration, active listening, identifying growth issues, identifying success issues and continuous growth as tenents basic to the effective helping relationship. These tenents are similarly basic to required clinical supervisor competencies (Mattaliano, 1977) and strategies to promote human growth and development put forth in the situational leaderhsip model (Hersey & Blanchard, 1982)

Finally, Sergiovanni's (1984) overview of "The Forces of Leadership and Excellence in Schooling" (p.12) endorses the notion of coupling situational leadership and clinical supervision. Sergiovanni includes the situational leadership precepts of organizational management, and growth and development of human resources as well as clinical supervison among the theoretical constructs linking leadership to excellence in schooling.

Situational Leadership

Overview

A current understanding of situational leadership can be readily acquired through an analysis of three aspects of the model.

The first aspect consists of a review of the major behavioral science theories and research identified by Hersey and Blanchard (1982) that serve as the foundation for situational leadership. The theories and research are reviewed in the context of their significance to the situational leadership model.

The second aspect consists of reviewing refinements made in the situational leadership model based on practical application of the theory. Blanchard (1985) in "Situational Leadership II" has significantly altered the previous (Hersey & Blanchard, 1982) perspective on "maturity" specific to task completion. These refinements have clarified the basic precepts of the situational leadership model.

Finally, the third aspect consists of reviewing the application challenges and possibilities that exist for the practicing situational leader.

Behavioral Science Theory

Maslow/Herzberg. It is useful to project Abraham Maslow's (1954) hierarcy of needs into the leadership model. Maslow's theory on human behavior and the degree to which it is influenced by the strongest need (among a spectrum of needs) at a particular time readily correlates with follower maturity and application of a corresponding leadership style. This correlation begins with the Physiological needs (e.g. food, shelter, clothing, etc.) corresponding to the lowest level of maturity and proceeds through Safety, Social and Esteem needs to Self Actualization corresponding with the highest level of follower maturity.

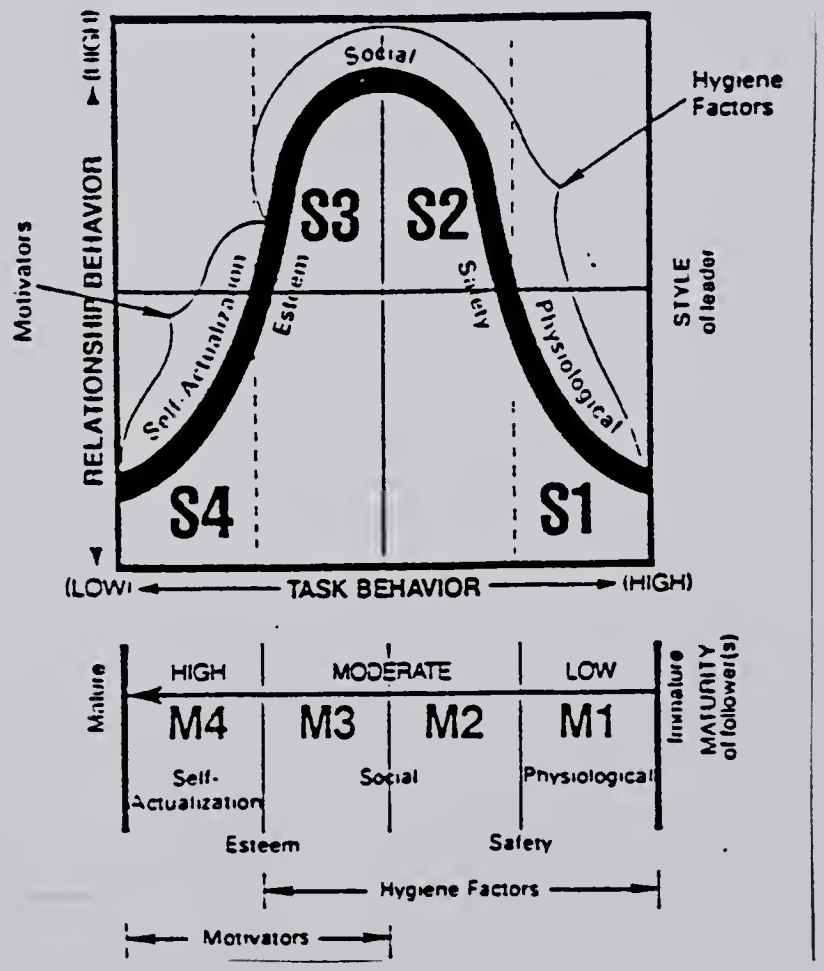
The needs along Maslow's hierarchy are not entities in themselves. As such, there is overlap among them that must be considered in establishing the follower's maturity and in selecting the leadership style most likely to satisfy those needs and attain the established organizational goals.

Similarly, it is useful to project Frederick Herzberg's (1966) Motivation-Hygiene Theory into the situational leadership model. His Hygiene factors (e.g. working conditions, money, status, security) correspond to less mature followers. As Hygiene needs are met the

Motivators (e.g. increased responsibility, challenging work, recognition for accomplishment) become indicators of higher levels of maturity and require use of corresponding leadership styles (i.e. S3, S4).

Table 2 (Hersey & Blanchard, 1982, p. 296) illustrates projections of Maslow and Herzberg's theories into the situational leadership model and related implications for selection of appropriate leadership styles.

TABLE 2
EFFECTIVE STYLES



McGregor/Likert/Argyris. Douglas McGregor's X and Y assumptions about human nature are readily integrated into the situational leadership model. Theory X leader attitudes view most followers as lacking self motivation, needing close control and therefore at the lowest level of

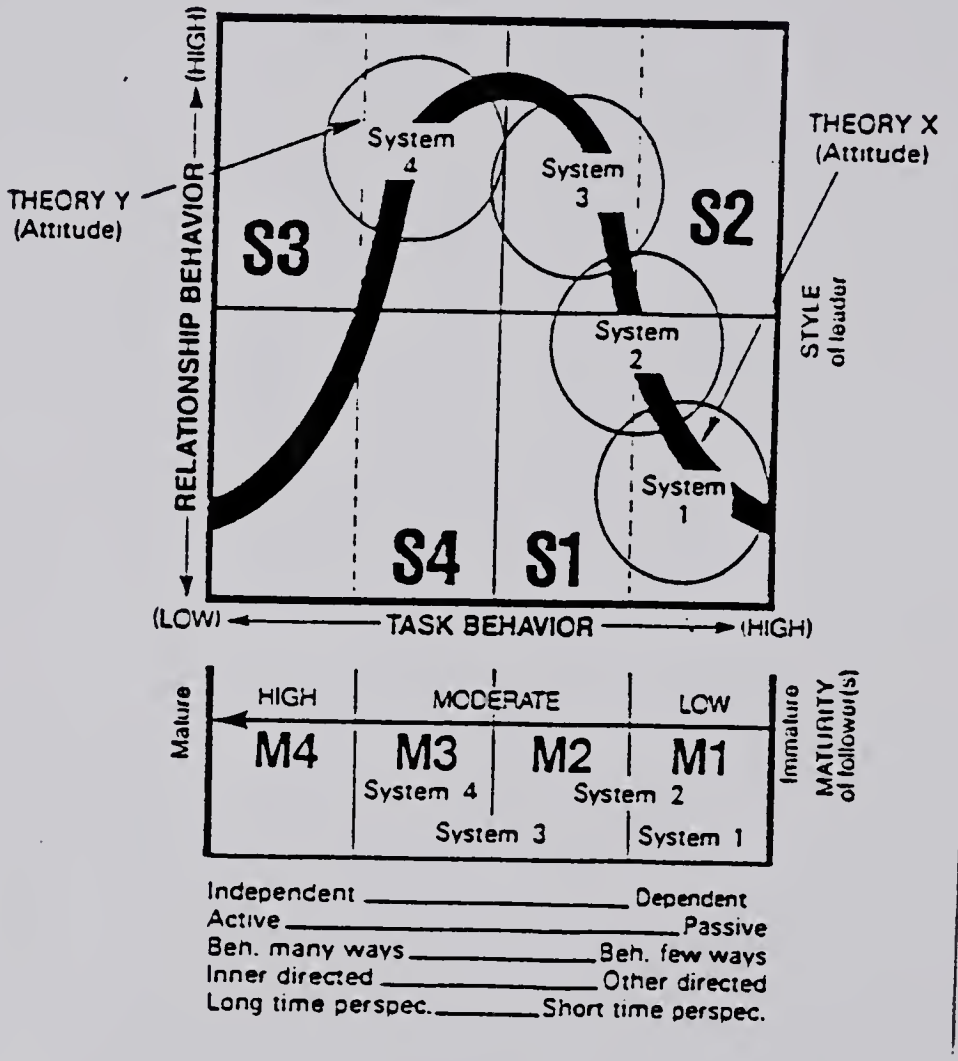
maturity in the model. Theory Y leader attitudes acknowledge the follower's capacity to be self directed, internally motivated, and therefore function at the upper end of the maturity spectrum.

Rensis Likert's (1967) four systems of management parallel McGregor's X and Y assumptions about human nature. His four systems represent dominant management styles that emerged from behavioral studies of several organizations. Likert's system 1 is the X equivalent with individuals seen as needing control; system 4, at the other extreme is a Y equivalent which is "relationship oriented management style based on teamwork, mutual trust and confidence" (Hersey & Blanchard, 1982, p. 65); while systems 2 and 3 represent intermediate styles between the two.

Chris Argyris' (1957) Immaturity-Maturity Continuum delineates "the seven changes (that) should take place in the personality of individuals if they are to develop into mature people over the years" (Hersey & Blanchard, 1982, p. 54). This continuum emerged from Argyis' concerns that consistent application of management practices based on Theory X assumptions (Bureaucratic/Pyramidal) about human nature stymies growth and maturity. Conversely, provision for situational application of management practices based on Theory Y assumptions (Humanistic/Democratic) were seen as facilitating maturity development and therefore holding the potential for increasing levels of task specific maturity.

Table 3 (Hersey & Blanchard, 1982, p. 297) below projects McGregor's X and Y Theories, Argyris' Immaturity-Maturity Continuum and Likert's four management systems into the situational leadership model.

TABLE 3
EFFECTIVE STYLES

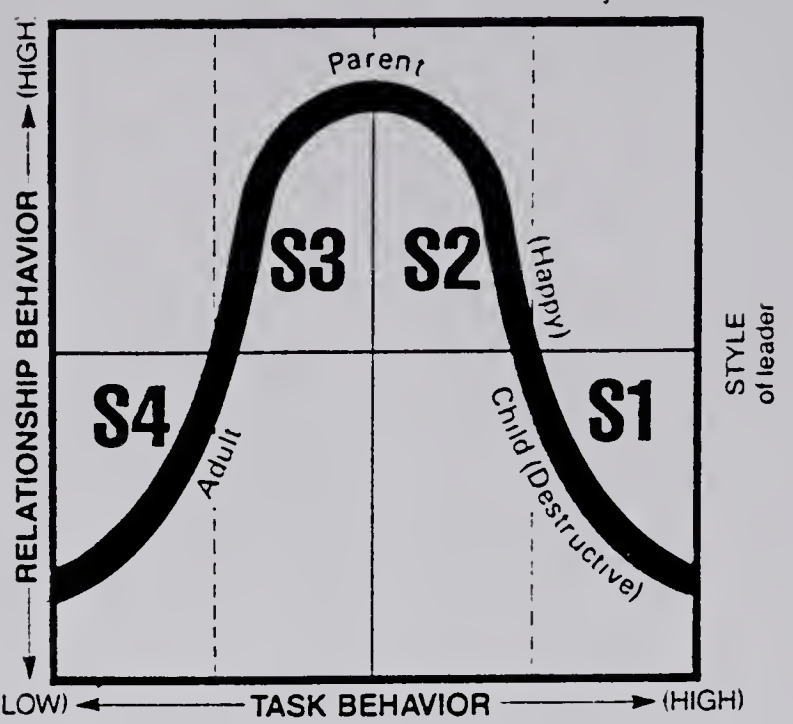


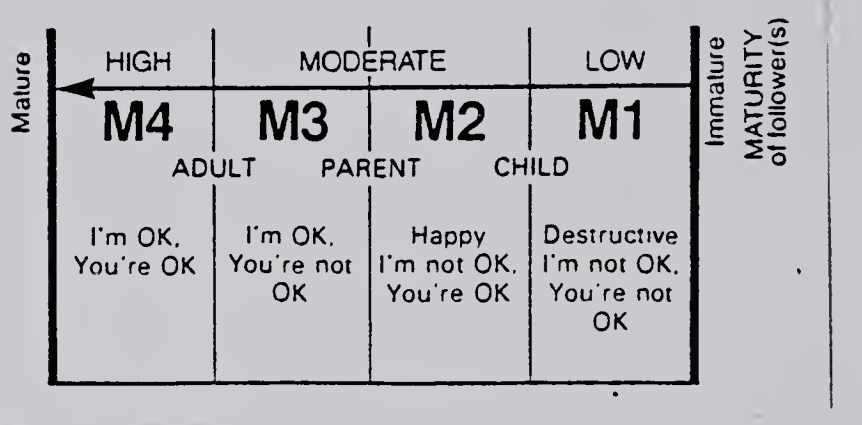
Berne/Harris. Eric Berne's (1964) Transactional Analysis (TA) can also be effectively integrated into the situational leadership model. Berne's method (TA) of analyzing and understanding behavior through three psychological ego states: parent, adult, and child provides valuable insight into the situationally varied maturity levels of individuals. More specifically, the flow-from Low Maturity (M1) to High Maturity (M4)

corresponds to the TA progression of destructive Child, Happy Child, Parent and Adult as shown in Table 4 (Hersey & Blanchard, 1982, p. 301). The leader's accurate identification of dominant ego state, at a given point in time, and corresponding selection of leadership style significantly influences the follower's willingness to work toward established organizational goals.

Ted Harris' (1969) life positions evolve from transactions between ego states. These life positions also correspond to the situationally varied maturity levels of individuals. More specifically, the movement from Low Maturity (M1) to High Maturity (M4) corresponds to the following life position progression: I'm not OK, You're not OK; I'm not OK, You're OK; I'm OK, You're not OK; I'm OK, You're not OK; I'm OK You're OK as shown in Table 4 (Hersey & Blanchard, 1982, p. 301). The suggested correlation between life positions and maturity provides the basis for selection of leadership style. The appropriateness of the leadership style is measured by consistently open communication between the leader and the follower, and accomplishment of established organizational goals.

TABLE 4
EFFECTIVE STYLES

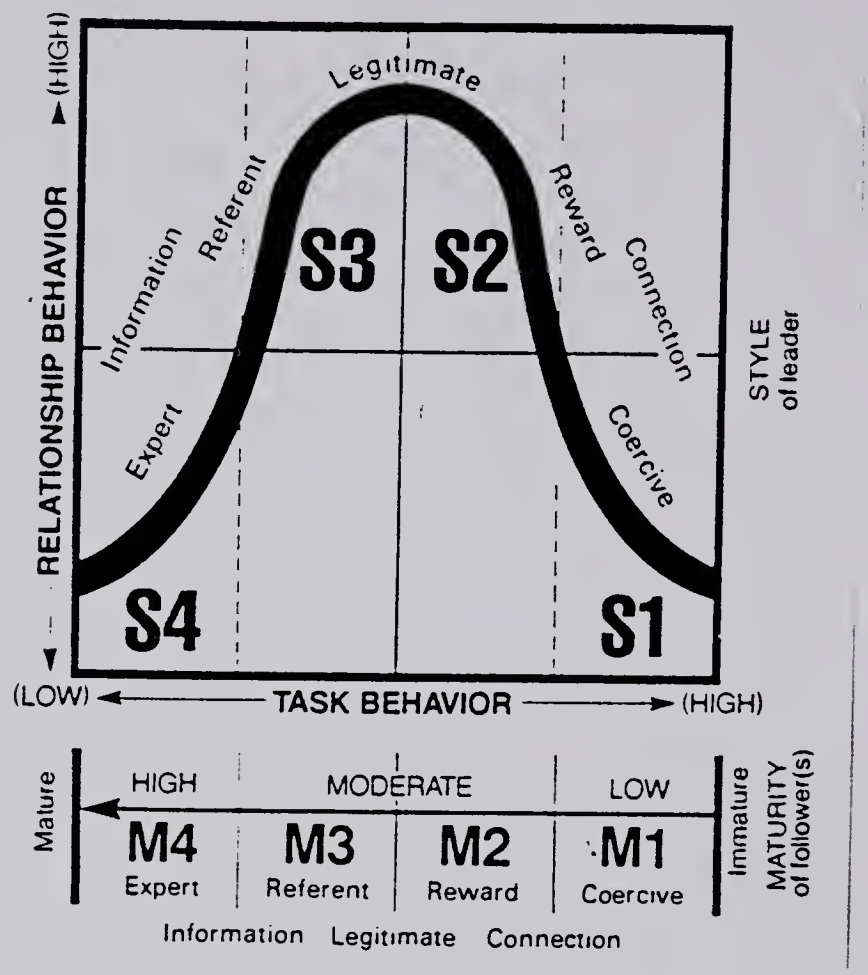




Power Bases. Hersey, Blanchard and Natemeyer's identification of seven power bases (Hersey & Blanchard, 1982, p. 178)(i.e. Coercive, Connection, Reward, Legitimate, Referent, Information and Expert) has special importance as projected against the situational leadership model. This special importance is found in the followers maturity level predicating both the corresponding leadership style and the most effective power base to apply as shown in Table 5 (Hersey & Blanchard, 1982, p. 304). As maturity levels progress from Low to High, Coercive power applications of fear and punishment give way sequencially to Expert power rooted in expertise and related skills. The overlap among these seven power bases

makes selection of an appropriate power base a formidable challenge for a leader.

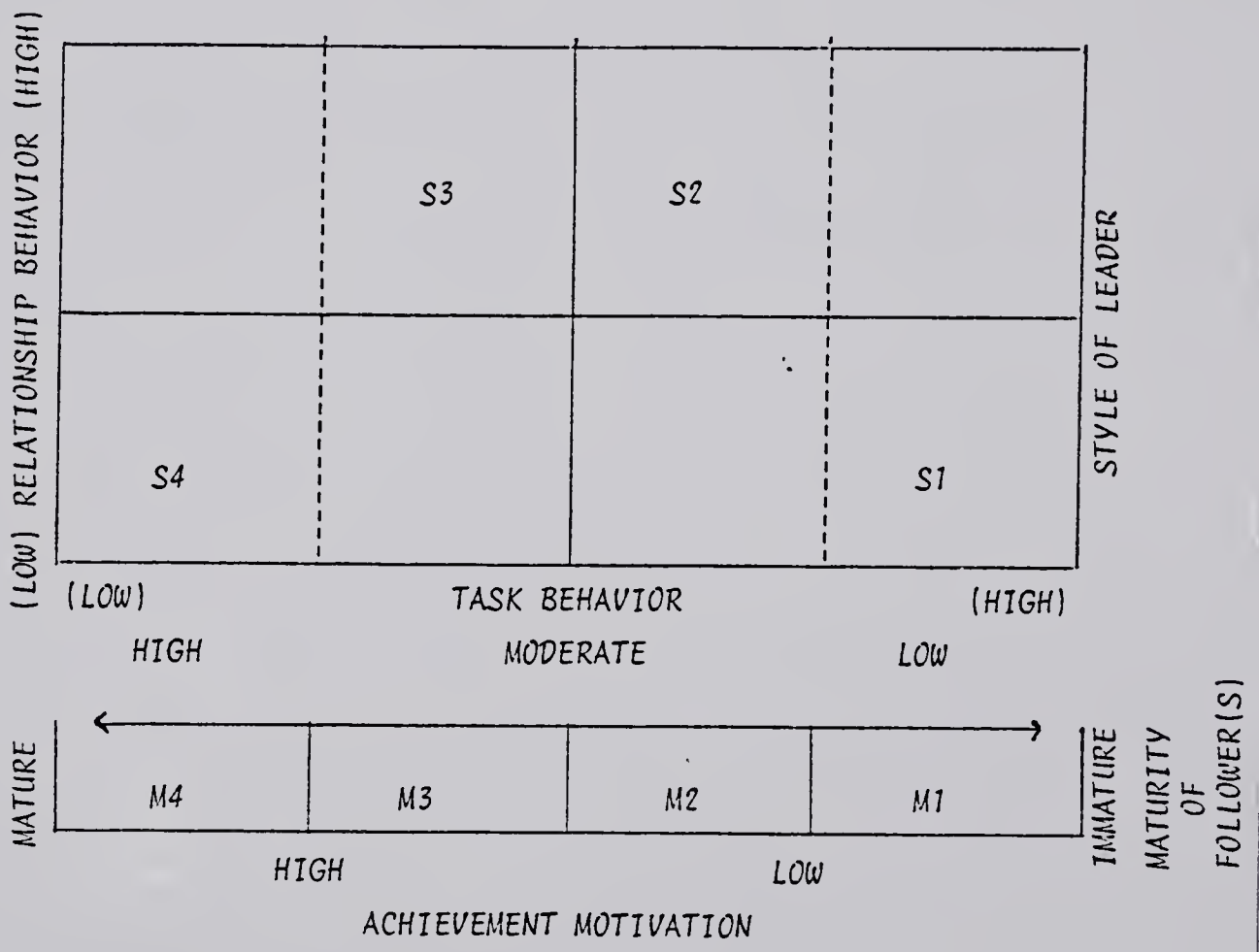
TABLE 5
EFFECTIVE STYLES



Achievement Motivation. David C. McClelland's (1953) research distinguished Achievement as a distinct human motivator. He characterized strongly achievement motivated individuals as those who were moderate risk takers, preferring task relevant feedback and proving successful as individuals in accomplishing organizational goals. The importance of Achievement Motivation in the context of situational leadership includes the following: the degree of achievement motivation, low to high, correlates with maturity levels (e.g. the higher the achievement motivation the higher the task specific maturity;

achievement motivation can be learned and therefore increased; and an inherent caution that successful achievement motivated followers may lack sufficient relationship skills to be effective leaders. Table 6 (Hersey & Blanchard, 1982, p. 299) illustrates the achievement motivation - maturity relationship and the related importance of selecting a corresponding leadership style.

TABLE 6
EFFECTIVE STYLES



Refinements

Blanchard (1985) has, based on practical experience and research, refined the situational leadership model previously defined in Management of Organizational Behavior (Hersey & Blanchard, 1982). "Situational Leadership II" (Blanchard, Ibid) has evolved from these refinements. In "Situational Leadership II" the basic

conceptualization of situational leadership - using leadership styles that match the developmental needs and perceptions of those you are trying to influence - remain intact.

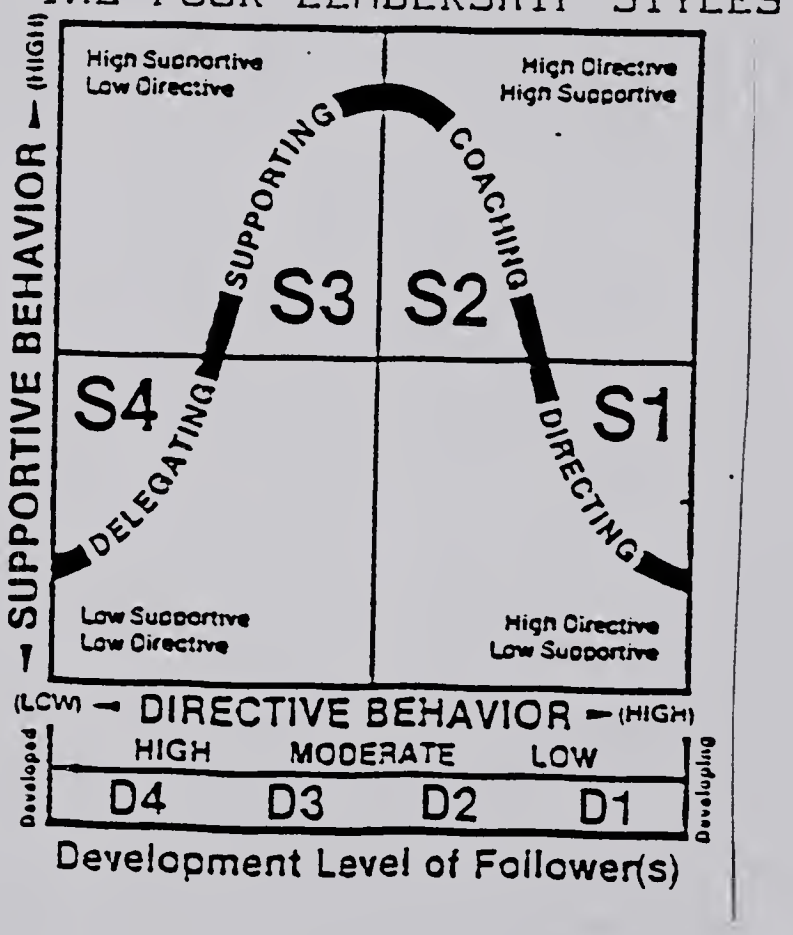
"Situational Leadership II" presents a significantly different perspective in defining an individual's capacity to perform a specfic task. "Development Level" (Blanchard, 1985, p. 4) - as opposed to "Maturity Level" (Hersey & Blanchard, 1982, p.151) - is used to define an individual's capacity to perform a specific task. "Development Level is defined as the Competence and Commitment of followers - to perform a task without supervision (Blanchard, 1985, p. 4)". "Competence" denotes skill acquisition gained from appropriate direction and support. "Commitment is a combination of confidence and motivation (Blanchard, Ibid)". The refined conceptualization of "Development Level" avoids the negative connotations associated with the word "maturity" and clearly articulates the basic situational leadership premise -that people have the capacity to grow and develop if provided appropriate direction and support. Tables 7 and 8 (Blanchard, 1985, p.4 and p.5) provide an effective visual summary of the "Situational Leadership II" model.

TABLE 7
DEVELOPMENT LEVELS

High Competence • High Commitment	High Competence • Variable Commitment	Some Competence • Low Commitment	Low Competence • High Commitment
D4	D3	D2	D1

Developed ◀ ..... Developing

TABLE 8
THE FOUR LEADERSHIP STYLES



Application Challenge

Hersey and Blanchard's (1982,1985) initiatives in using their situational leadership model as a construct for application of behavioral science theories and research are encouraging. Their pursuit of effectively utilizing human resources has important organizational and individual worth. Walter, Caldwell and Marshall (1980)

provide evidence for the validity of situational leadership theory in providing school related documentation "that no one style is consistently more effective than another" (p.618) and propose the related need for supervisors to expand their "repertoire of leader behaviors" (p.620). The challenge for all who are committed to effectively utilizing human resources through application of situational leadership theory is significant.

The leader's competency emerges as the key to implimenting the situational leadership model. Significant among the requisite competencies is the supervisor's capacity to identify perceptions of colleagues and adapt leadership styles to task specific development levels. A supervisor competent in using supportive and directive behaviors that correspond to the task specific levels of commitment and competence demonstrated by an individual increases the growth and development of that individual as well as the accomplishment of organizational goals.

The leader's challenge in adapting leadership style to a group's task specific development level is increased. When this task of assessing a group's development level in the context of strength of needs, hygienic-motivator considerations and level of achievement motivation represented by the individuals within that group, the complexities of this task can be readily seen. However, a leader skilled in adapting leadership styles to a group's task specific development level increases the extent of

accomplishment of organizational goals as well as promoting individual growth and development.

In summary, situational leadership theory provides, a methodology for individualizing approaches in working with people to accomplish organizational goals. Successful application of the methodology requires the leader to meet the challenge of varying supportive and directive behaviors to match the competence and commitment an individual brings to a particular task. Hall, Rutherford, Hard and Hurling (1984) establish the need for training programs and research that help educational supervisors situationally vary their "facilitator style" (p.27) to effectively accomplish organizational goals in a school environment. In order to meet this challenge and maximize leadership effectiveness the leader must incorporate self perceptions, others perceptions and develop related strategies for growth.

Literature Summary and Relationship to the Problem

This study focuses on development of an instructional process for supervisors that enables them to apply situational leadership theory to increase their effectiveness as clinical supervisors. The need for this undertaking has been clearly documented in the literature. Brammer's (1973) emphasis on promoting individuals' self actualization, in the helping relationship, by accepting their perceptions as real for them similarly supports developing a process that incorporates these aims.

The content and worth of clinical supervision has been well defined (Goldhammer, 1969; Cogan, 1973; Mattaliano, 1977; Reavis 1978; Goldhammer, Anderson, & Krajewski, 1980; Garman 1982; McGreal, 1983; Canizaro, 1985; Harris, 1986). However, clinical supervision remains a largely dormant force in education (Goldhammer, Anderson & Krajewski, 1980; Lovell & Wiles, 1983). A review of the literature clearly establishes the importance of developing a process to increase clinical supervision effectiveness (Glatthorn, 1984; McGreal, 1983; Scafidel, 1982).

This study is based on the premise that application of situational leadership theory will prove helpful in addressing those variables that have major impact on the effectiveness of clinical supervision - organizational commitment to the development of human resources, the teacher-supervisor relationship, and supervisor competence. The development of an instructional tool to help supervisors apply situational leadership theory to increase their effectivness as clinical supervisors is a pragmatic attempt to promote the growth, development and effective application of clinical supervision.

This study's intent is to develop a process that provides supervisors with a means to effectively promote continuous improvement of instruction. This process, coupling clinical supervision and situational leadership theory, is an attempt to enhance clinical supervision practice by melding organizational and individual needs

(Lovell & Wiles, 1983; Blanchard, 1985), systematically making supervisor and teacher perception a part of the process (Brandt, 1987; Canizaro, 1985; Hersey & Blanchard, 1982), increasing teacher ownership of the process (Goldhammer, 1969; Cogan, 1973), and providing supervisors with a self-learning (Bunker, 1977; Valverde, 1982) strategy to situationally vary supervision approaches (Mattaliano, 1977; Glickman, 1981; Sergiovanni & Starratt, 1983; DeBevoise, 1984; Dwyer, 1984; Blanchard, 1985). The design of this study delineated in Chapter III is the basis for development of a process that further defines the relationship between clinical supervision and situational leadership, incorportes teacher and self perception, provides individual approaches based on teacher developmental need, serves as a self-learning tool for supervisors, promotes the development of teachers and supervisors, and promotes continuous improvement of instruction.

C H A P T E R I I I

RESEARCH DESIGN

Introduction

The research design employed in this study serves two functions. First, data are generated from teachers and supervisors that define the relationship between clinical supervision and situational leadership beyond that suggested by the literature presented in Chapter II. Second, the data are generated in a replicable format that become the basis for development of a process that clinical supervisors may use to increase their effectiveness.

Definition of Terms

Clinical Supervision

Clinical Supervision is an approach to supervision, defined by Robert Goldhammer (1969) and Morris Cogan (1973) that focuses on observing, analyzing and discussing the events of the classroom. Clinical Supervision attempts to provide the teacher with positive feelings toward supervision (Cogan, 1973, p. 58), helps to develop teacher understanding of the importance of making instructional outcomes consistent with intents (Cogan, 1973, p. 164), and most importantly helps the teacher develop the skills necessary to perform analysis of instruction (Cogan, 1973, p. 198).

Clincial Supervisor

A Clinical Supervisor is a practitioner of clinical supervision that "understands the nature of educational encounters and has the inquiry skills to make sense out of the events under consideration" (Garman, 1982, pp. 48-50) as well as "the individual differences among teachers" (Lovell & Wiles, 1983, p. 182).

Clinical Supervision Effectiveness

Clinical Supervision effectiveness is Supervision resulting in teachers having positive feelings toward supervision (Cogan, 1973, p. 58), understanding the importance of making instructional outcomes consistent with intents (Cogan, 1973, p. 169), and most importantly developing the skills necessary to perform analysis of instruction (Cogan, 1973, p. 195).

Teacher

A Teacher is one who has experienced one or more "cycle(s) of supervision" (Cogan, 1973, p. 10).

Situational Leadership Theory

Situational Leadership Theory is an approach to leadership based on the premise that there is no one best way for a leader to influence follower behavior toward accomplishment of organizational goals. Situational

Leadership Theory advocates that the leader use varying combinations of task and relationship behavior determined by the follower's commitment and competence (Development Level) to perform a specific task at hand (Hersey & Blanchard, 1982; Blanchard, 1985).

Situational Leader

A Situational Leader is a leader who accurately assesses followers' commitment and competence (Development Level) to perform a specific task and uses correspondingly appropriate amounts of task and relationship behaviors in promoting follower Development Level and success in accomplishment of organizational goals.

Canizaro Self Evaluation Instrument (CSEI)

The CSEI is a self assessment tool for teachers and supervisors that generates supervision effectiveness scores.

Leader Behavior Analysis II (LBA II)

The LBA II is an assessment tool for followers (LBA II-Other) and leaders (LBA II-Self) that generates style effectiveness scores that attempt to measure situationally appropriate leadership behavior.

Perception

Perception is a "physical sensation interpreted in the light of experience [italics added]" (Webster, 1969, p. 626).

Methodology

The CSEI and LBA II were distributed to 20 supervisors and 100 teachers from two Connecticut public schools systems. This same group also completed a demographic data sheet. Responses to the CSEI and LBA II were based on the perceptions of participating supervisors and teachers. All of their responses were coded to insure anonymity.

The primary methodology used for testing each hypothesis is a statistical analysis of responses to the LBA II and CSEI as defined in each hypothesis statement. The relationship between effective clinical supervsion experiences for teachers and effective supervisor application of situational leadership is defined through an analysis of numerically weighted responses derived from the LBA II and CSEI using the Spearman Rank - difference Method. A probability indicator of .05 was used as a basis for accepting or rejecting each hypothesis and determining the significance of the relationship between clinical supervision and situational leadership.

Population

Target Population

The participants for this study were drawn from a population of teachers and supervisors from two Connecticut public school systems. The combined teaching and supervisory staffs of these two school systems number six hundred fifty (650) and seventy (70) respectively. These teaching and supervisory staffs work with approximately thirteen thousand (13,000) students in eighteen (18) elementary schools, three (3) middle schools, three (3) special education schools and two (2) high schools. Both the supervsors and teachers in this population are actively engaged in clinical supervision.

Participants

The Assistant Superintendents for personnel in the two participating school systems randomly distributed introductory letters and surveys to a total of twenty (20) supervisors and one hundred teachers working with these supervisors. Twenty supervisors (100%) and seventy-one teachers (71%) returned their respective responses to the surveys. However, four supervisors and 5 teachers did not follow the prescribed coding procedures in completing their surveys. In an effort to keep the data as clean as possible, only correctly coded responses that clearly established related supervisors and teachers were used. As a result the participants in this study represent 16 (80%) of the supervisors surveyed and 66 (66%) of the teachers surveyed. These sixteen supervisors represented

14 elementary schools, one middle school, and one high school level special education school.

Data Collection

The data were collected by disseminating respective forms of the LBA II and CSEI to participating teachers and clinical supervisors and gathering related demographic information. A brief description of the researcher's interest in promoting the effective use of clinical supervision was provided to participants. (Appendix A) The respective forms of the LBA II and CSEI were coded to accurately denote teacher, supervisor and school system affiliations. Following completion of the LBA II (Appendices B,C) and CSEI, (Appendices E,F) participants completed a comparably coded Demographic Data Sheet (Appendix G). The coded responses to the LBA II and Demographic Data Sheet were mailed directly to the researcher to insure anonymity. The researcher sorted and scored all data.

Instrumentation

The Canizaro Self Evaluation Instrument was developed by Beth Canizaro in 1984. The instrument includes twenty-six (26) items that represent six clusters that the author has identified, from a review of the literature, as significant in promoting effective instructional supervision (see Appendix E). The six possible responses to each item translate into weighted numerical responses ranging from 0-5. Documentation for

the instrument is replete with clinical supervision references (i.e. Cogan, Goldhammer, Mattaliano) and therefore will be used in assessing effective clinical supervisory experiences for teachers as defined. The CSEI provides respective forms for teachers and supervisors as well as delineates resources for supervisor improvement.

Blanchard Training and Development's Leader Behavior Analysis II was initially developed in 1981 and revised in 1985. The LBA II includes twenty (20) items with four possible responses to each item. Eight of the twenty items require individual responses to group situations with the remainder requiring individual responses to individual situations. Responses to the LBA II are numerically weighted and translated into a supervisor Style Effectiveness Score indicating the degree to which the leadership style selected was appropriate for each of the twenty (20) situations, and it provides direction for Style Effectiveness improvement. The LBA's Self and Other forms allow an individual to obtain both personal and others' perceptions as they relate to leadership behavior.

The Demographic Data Sheet was developed by this researcher to derive and document information that may prove useful in the analysis of data generated from participants' responses to the CSEI and LBA II. General areas of information include distinguishing roles (i.e. teacher, supervisor), years of experience in those roles, and extent of experience and training with clinical supervision and situational leadership.

Analysis Procedure

The analysis of data in Chapter IV is conducted in three strands for each Hypothesis. First, a statistical analysis, as prescribed by the Spearman-Rank-difference Method is completed. Second, a Supplemental Analysis is undertaken in an effort to identify issues, within the data, that may have contributed to the statistical correlation derived. The Supplemental Analysis includes examination of related information from the Demographic Data Sheet. Third, issues that emerge from the data as important in developing a process to help supervisors increase their effectiveness as clinical supervisors are identified for further consideration in Chapter IV.

This analysis procedure is designed to maximize understanding of successful practices that may be replicated by other supervisors. The statistical acceptance or rejection of each Hypothesis is viewed as secondary to increased understanding of the relationship that exists between supervisors and teachers actively engaged in clinical supervision. The combination of increased understanding of this relationship and related literature provide the practical and theoretical basis for the process articulated in Chapter V.

Summary

Chapter II delineated the importance of teacher and supervision perceptions in the development of a process that promotes continuous improvement of instruction. The CSEI was administered to both teachers and supervisors, in this study, to compare and contrast these perceptions.

Chapter II also delineated the importance of supervisors using leadership styles that match teachers' developmental levels as perceived by them. The LBA II was administered to both teachers and supervisors to compare and contrast those perceptions.

The analysis of the teacher and supervisor responses to the CSEI and LBA II, in Chapter IV, coupled with data derived from the Demographic Data Sheet further define the relationship between clinical supervision and situational leadership. The process for increasing clinical supervision effectiveness presented in Chapter V is an outgrowth of this analysis and the research presented in Chapter II.

CHAPTER IV

DATA ANALYSIS

Introduction

Chapter IV provides an analysis of data generated by this study. This analysis will focus on each stated hypothesis coupling related demographic data with a statistical and supplemental analysis of teacher and supervisor responses to their respective forms of the LBA II and CSEI. This chapter will conclude with an analysis summary that provides the basis for the Process for Increasing Clinical Supervision Effectiveness articulated in Chapter V.

Hypothesis I

Hypothesis I attempted to determine what relationship existed between teacher and supervisor perceptions of clinical supervision experiences. Teacher and supervisor responses to the CSEI and the Demographic Data Sheet were analyzed in an effort to answer two related questions:

1. Were supervisors with higher CSEI self ratings given similarly high CSEI ratings by the teachers they supervised?
2. Was there any demographic information significant to this finding?

Hypothesis I is formally stated as follows: There is a statistically significant relationship between teacher and supervisor responses to the CSEI.

Spearman Rank-difference Results

The Spearman Rank-difference Method was used as the initial means of assessing the relationship stated in Hypothesis I. The correlation coefficient (p) needed to establish a significant relationship at the .05 level of significance for the 16 supervisors (S) and their corresponding teacher responses (T) to the CSEI was .425.

TABLE 9
CSEI STATISTICAL RESPONSE ANALYSIS

SUPERVISOR	SELF SCORE	RANK(S)	TEACHER (n) SCORE		RANK(T)	DIFFERENCE (D)	(D2)
A	103	8.5	78	(3)	15	6.5	42.06
B	90	14	82	(2)	14	0	0.00
C	117	1.5	87	(5)	11	9.5	90.25
D	112	5	125	(5)	2	3	9.00
E	117	1.5	104	(4)	6	4.5	20.25
F	110	6	122	(5)	3	3	9.00
H	100	11	84	(5)	13	2	4.00
O	103	8.5	92	(4)	9	.5	0.25
Q	98	12.5	126	(5)	1	11.5	132.50
R	116	3	111	(5)	4	1	1.00
S	108	7	105	(4)	5	2	4.00
T	88	15	95	(4)	8	7	49.00
U	102	10	77	(1)	16	6	36.00
V	114	4	100	(4)	7	3	9.00
Y	98	12.5	90	(5)	10	2.5	6.25
Z	81	16	85	(5)	12	4	16.00

P=.370

The .370 coefficient fell short of the .425 coefficient required to establish a statistically significant relationship between supervisor and teacher responses to the CSEI. It can readily be deduced from these results that teacher and supervisor perceptions of clinical supervision effectiveness as measured by their

respective responses to the CSEI were clearly different - supervisors' self rankings did not statistically correlate with the mean rankings of teachers (eight were higher and eight were lower).

A far more important question arises from this statistical conclusion - Why? A supplemental individual analysis of the data generated by supervisor and teacher responses to the CSEI provides some insight in addressing this question.

Supplemental Teacher Response Analysis

Table 10 reports the results of Teacher responses (T) to the CSEI. Supervisors are ranked based on the mean CSEI score of their teachers. In addition, the range of teacher responses from high to low is reported as a means of assessing the degree to which teacher perceptions of the supervisor's clinical supervision effectiveness varied. The highest attainable score is 130 and the lowest attainable score is 0. The mean teacher response to the CSEI was 99. Comparative summary statements are provided for supervisors ranked 1-4 (Group I), 5-8 (Group II), 9-12 (Group III) and 13-16 (Group IV).

TABLE 10
CSEI TEACHER RESPONSE ANALYSIS

GROUP	RANK/ SCORE(I)	SUPER-VISOR	RANGE(I) (high)(low)	(n)	SUMMARY
I	1 (126)	Q	127-120= 7	(5)	1.Average range =17
	2 (125)	D	130-110=20	(5)	2."low" mean=109=
	3 (122)	F	127-110=17	(5)	10 above
	4 (111)	H	120- 97=23	(5)	3. "high" mean=126
II	5 (105)	S	129- 63=66	(4)	1.Average range=50
	6 (104)	E	125- 52=73	(4)	2."low" mean=69=
	7 (100)	V	112- 94=18	(4)	30 below
	8 (95)	T	119- 64=45	(4)	3."high" mean=121
III	9 (92)	O	113- 70=43	(4)	1.Average range=53
	10 (90)	Y	112- 49=63	(5)	2."low" mean=57=
	11 (87)	C	117- 52=65	(5)	42 below
	12 (85)	Z	97- 58=39	(5)	3."high" mean=110
IV	13 (84)	H	108- 53=55	(5)	1.Average range=45
	14 (82)	B	101- 63=43	(2)	2."low" mean=45=
	15 (78)	A	95- 52=43	(5)	54 below
	16 (77)	U	one (I) response		3."high" mean=101

Supplemental Teacher Response Analysis Summary

Group I Supervisors ranked 1-4 by teachers with whom they work had the smallest average range of response - 17 points. This suggests that these supervisors are consistently and similarly viewed by their teachers as effective clinical supervisor practitioners with a "high" mean score of 126 and a "low" mean score of 109. This commonality among these most effective supervisors, as perceived by teachers, warrants special attention in an effort to develop a process that helps other supervisors increase their clinical supervision effectiveness.

The suggested importance of consistency in teacher perception increases as this analysis continues. The average range of response for Group II supervisors, ranked 5-8 by their teachers, increased to 50 points - almost triple the range of Group I supervisors. The "high" mean of 121 suggests that these supervisors were effective in meeting some teacher clinical supervision needs. However, the "low" mean of 69 (30 points below the average mean of 99) suggests that some other teacher clinical supervision needs were not nearly as effectively met by these supervisors.

In a similar vein, the average teacher response range for Group III supervisors ranked 9-12 increased to 53 points - again, more than triple the range of teacher response for supervisors in Group I. The "high" mean of 110 again suggests that these supervisors were still effective in meeting some teacher clincial supervision needs. However, the low mean of 57 (42 points below the average mean of 99) again suggests that some other teacher clinical supervision needs were not nearly as effectively met by these supervisors.

The pattern of average teacher response range almost triple that of Group I supervisors continues for Group IV supervisors ranked 13-16. The "high" mean of 101 and a "low" mean of 45 points establish this group of supervisors as minimally effective clinical supervisors.

The issue of varied perceptions becomes even more distinct when supervisors perceptions of themselves as clinical supervisors are examined in comparison to their teachers' perceptions.

Supplemental Supervisor Response Analysis

Table 11 couples supervisor (S) and teacher (T) CSEI scores. Supervisors are ranked based on their own CSEI score. In the three instances where a tie score occurred supervisors were successively ranked for clarity of comparative analysis. The range between mean teacher score and supervisor score is also reported as an additional means of assessing the degree to which teacher and supervisor perception of clinical supervision effectiveness varied. The mean supervisor response to the CSEI was 98. The Summary portion of Table 11 compares the supervisor's group rankings (I, II, III, IV) with their teachers.

TABLE 11
CSEI SUPERVISOR RESPONSE ANALYSIS

GROUP	RANK	SUPER-VISOR	SCORE(S)	SCORE(T)	(n)	RANGE (T-S)	SUMMARY
I	1	C	(117)	(87)	(5)	30	up from III
	2	E	(117)	(104)	(4)	13	up from II
	3	R	(116)	(111)	(5)	5	Returns
	4	V	(114)	(100)	(4)	14	up from II
II	5	D	(112)	(125)	(5)	13	down from I
	6	F	(110)	(122)	(5)	12	down from I
	7	S	(108)	(105)	(4)	3	Returns
	8	O	(103)	(92)	(4)	11	up from III
III	9	A	(103)	(78)	(3)	25	up from IV
	10	U	(102)	(77)	(1)	25	up from IV
	11	H	(100)	(84)	(5)	16	up from IV
	12	Y	(98)	(90)	(5)	8	Returns
IV	13	Q	(98)	(126)	(5)	18	down from I
	14	B	(90)	(82)	(2)	8	Returns
	15	I	(88)	(95)	(4)	7	down fromII
	16	Z	(81)	(85)	(5)	4	down fromIII

Supplemental Supervisor Response Analysis Summary

The membership of Groups I, II, III, IV as determined by supervisors' self scores (S) on the CSEI varied significantly when compared to teacher perceptions (T) of those same supervisors. Consistency in teacher and supervisor perceptions of clinical supervision effectiveness emerges from the data as an important consideration.

The membership of Group I changed significantly. Supervisor R, with self and teacher scores above the mean and a teacher-supervisor point range of 5 was the only supervisor to appear in both Group I's. As suggested in the preceeding Teacher Response Analysis Summary, the consistency in perceptions of clinical supervision effectiveness - teacher and supervisor in this case - seems to emerge from the data as an important consideration. The self scores of the three other supervisors in Group I brought them up from their teacher rankings in Groups II and III. A relationship between supervisors who rate themselves higher or lower than their teachers begins to evolve from the data.

Similarly, in Group II only Supervisor S, with self and teacher scores above the mean and a teacher-supervisor point range of 3, appears in both Group IIs. The relationship between supervisors who rate themselves higher or lower than their teachers continues to evolve as

teacher and supervisor rankings are analyzed. Supervisors D and F self scores were, although above the mean, below their teachers mean scores which had previously placed them in Group I. Supervisors D and F thus move down to Group II. Conversely Supervisor O's self score was above the mean and higher than the related teacher score which was below the mean. Supervisor O thus moves up to Group II.

Again, Group III provides only Supervisor Y, with a self score at the mean of 98, a teacher score below the mean and a teacher-supervisor point range of 8, as common to both Group IIIs. Supervisors A, U and H self scores were above the mean and higher than their related teacher scores which were below the mean. Thus these supervisors moved up to Group III.

Group IV data provide patterns similar to those articulated in the analysis of Groups I, II and III. The common supervisor to Teacher and Supervisor Group IV is B. Supervisor B's self and teacher scores are below the mean with a teacher-supervisor point range of 8. The common perceptions of supervisor B and related teachers is consistent with this supervisor's inclusion in both Group IVs. In addition, supervisors Q, T and Z self scores were at or below the mean and lower than their related teacher scores. Thus these supervisors moved down to Group IV.

Demographic Data Analysis

Relevant Teacher and Supervisor demographic response data are summarized in Tables 12 and 13 in an effort to discern potentially significant relationships to CSEI scores. Sixty-six teacher responses generated a mean of 99 on the CSEI.

TABLE 12
TEACHER DEMOGRAPHIC DATA ANALYSIS

	Clinical Supervision Training	Years with Current Supervisor			
Teacher (n)	16 (24%)	16+ 3(4%)	11-15 2(3%)	6-10 13(20%)	up to 5 48(73%)
MEAN CSEI SCORE	103	75	109	98	98

The demographic data summary of teacher responses in Table 12 provides some useful insights. First it indicates that teachers who had received clinical supervision training rated their supervisors slightly above the mean. The mean CSEI scores generated by teachers in the "up to 5" and "6-10" categories suggests that years of working together may not -in itself - be a significant factor in contributing to clinical supervision effectiveness. The small percent of total response represented by the categories "16+" and "11-15" makes it difficult to suggest the significance of their results.

Teacher mean responses for their supervisors and demographic information generated from those supervisors is displayed in Table 13 below. Supervisors experience and clinical supervision training are examined to determine

relevance to the ranking teachers (T) provided their supervisors. For purposes of analysis, supervisors ranked 1-4 will be referred to as Group I; those ranked 5-8 - Group II; those ranked 9-12 - Group III; and those ranked 13-16 - Group IV.

TABLE 13
SUPERVISOR DEMOGRAPHIC DATA ANALYSIS

Group	Rank (T)	CSEI Score(T)(n)	Super-visor(S)	Clinical Supervisor Training(S) (Yes/No)	Years in Current Role (S)
I	1	(126) (5)	Q	Yes	up to 5
	2	(125) (5)	D	Yes	16+
	3	(122) (5)	F	Yes	16+
	4	(111) (3)	R	Yes	16+
II	5	(105) (4)	S	No	up to 5
	6	(104) (4)	E	No	up to 5
	7	(100) (4)	V	No	up to 5
	8	(95) (4)	T	No	6-10
III	9	(92) (5)	O	Yes	6-10
	10	(90) (5)	Y	Yes	16+
	11	(87) (5)	C	Yes	16+
	12	(85) (5)	Z	Yes	6-10
IV	13	(84) (5)	H	Yes	16+
	14	(82) (2)	B	No	16+
	15	(78) (3)	A	Yes	16+
	16	(77) (1)	U	No	11-15

Again, supervisors in Group I were perceived by teachers as the most effective clinical supervisors. All supervisors in this group indicated they had received clinical supervision training and three of the four had more than 16 years of experience as supervisors. The perceived significance of these findings becomes somewhat tainted as the clinical supervision training and years of

experience issues are examined for Groups I, II and III.

For instance, none of the supervisors in Group II indicated they had received clinical supervision training. In addition, three of the four supervisors had less than six years of experience and the other had less than 11 years experience. The analysis of Group III that follows amplifies the complexity of the training and experience issues.

Supervisors in Group III were percieved by their teachers as less effective than supervisors in Group II and I. However, all of these supervisors indicated they had participated in clinical supervision training and none had less than 6 years experience.

Supervisors in Group IV were perceived as least effective when compared to Groups I, II and III. Although comparatively viewed as least effective, 3 of the 4 supervisors in this group had more than 16 years supervisory experience and 2 of the 4 indicated involvement with clinical supervision training.

The task of attaching relative importance to clinical supervision training and supervisory experience is a perplexing one. It is extremely difficult to ignore the supervision training cited by supervisors in Group I when they are viewed by their teachers as effective clinical supervisors. However, the relative effectiveness of supervisors in Group II - lacking clinical supervision

training and supervisory experience exceeding 10 years - provides an interesting contrast to the experienced, clinical supervision trained supervisors in Groups III and IV.

Demographic Data Analysis Summary

The analysis of this demographic data suggests that although clinical supervision training has importance, it does not guarantee that teachers will perceive trained supervisors as effective. The success of Group II supervisors reinforces the importance of teacher perception of clinical supervision effectiveness and perhaps suggests supervisor effectiveness could be increased with clinical supervision training. Also the issue of years of supervisory experience and years with a current supervisor may not represent obstacles in providing effective clinical supervision experiences for teachers.

Conclusions

Although the statistical analysis of teacher and supervisor scores on the CSEI failed to support the relationship stated in Hypothesis I, the subsequent supplemental analysis of their responses and related demographic data have provided valuable insight in developing a process to help supervisors increase their clinical supervision effectiven analysis provided insight regarding teacher-supervisor perceptions, clinical

supervision training for teachers and supervisors as well as the clinical supervision relationship over time. Related teacher and supervisor perceptions of clinical supervision effectiveness are clearly varied. The amount of variation in perceived effectiveness may change from teacher to teacher. In addition, supervisors who were generous in self ratings were generally viewed as less effective by their teachers. This research would suggest that a process for helping supervisors improve their clinical supervision effectiveness must then provide a means of surveying teacher perceptions of their supervisor and narrowing the supervisor-teacher perceived effectiveness gap.

The demographic data analysis also suggests the merit in clinical supervision training for teachers and supervisors. Teacher understanding of the process may have contributed to their having a somewhat enhanced perception of their clinical supervisor's effectiveness. However, supervisors participation in clinical supervision training alone does not appear to universally guarantee their success as clinical supervisors as perceived by their teachers. The data suggest then that clinical supervision training is important for teachers and supervisors but in itself does not insure maximally effective clinical supervision experiences for teachers.

The analysis of clinical supervision effectiveness over time is an interesting one. Teachers working with the same supervisor for up to ten years viewed their clinical supervisor's effectiveness similarly as evidenced by a common CSEI mean score of 98 for both the "up to five years" and the "6-10 years" groups. The data also suggest that total years of experience as a supervisor neither guarantees nor negates achieving maximum success as a clinical supervisor.

In conclusion, this analysis of Hypothesis I suggests that a process for helping supervisors increase their clinical supervision effectiveness must provide strategies for synchronizing teacher-supervisor perceptions and enhancing clinical supervision training.

Hypothesis II

Hypothesis II attempted to determine what relationship existed between teacher and supervisor perceptions of the supervisor's capacity to choose a leadership style most appropriate to the needs of people in a given situation - Style Effectiveness. Similar to Hypothesis I, Teacher and Supervisor responses to their respective forms of the LBA II and their Demographic Data Sheets were analyzed in an effort to answer two questions related to Hypothesis II:

1. Were supervisors with higher LBA II self ratings given similarly high LBA II ratings by the teachers they supervised?
2. Was there any demographic information significant to this finding?

Hypothesis II is formally stated as follows. There is a statistically significant relationship between teacher Style Effectiveness ratings of supervisors and supervisor self rating of Style Effectivenss as measured by respective forms of the LBA II.

Spearman Rank-difference Results

The Spearman Rank-difference method was again used as the initial means of assessing the relationship stated in Hypothesis II. The correlation coefficient (p) needed to establish a significant relationship at the .05 level of significance for the 16 supervisors and their corresponding teacher responses to the LBA II was again .425.

TABLE 14
LBA II STATISTICAL RESPONSE ANALYSIS

Super-visor	Self Score	Rank(S)	Teacher Score	(n)	Rank(T)	Difference D	D2
A	58	8	56	(2)	4.5	3.5	12.25
B	56	11	55	(2)	7	4	16.00
C	61	7	53	(5)	11	4	16.00
D	56	11	58	(5)	2.5	8.5	72.25
E	64	4	52	(4)	13.5	9.5	90.25
F	56	11	55	(5)	7	4	49.00
H	54	14	55	(5)	7	7	49.00
O	63	6	58	(4)	2.5	3.5	12.25
Q	69	1	54	(4)	9	8	64.00
R	64	4	53	(5)	11	7	49.00
S	64	4	59	(4)	1	3	9.00
I	57	9	52	(3)	13.5	4.5	20.25
U	47	16	50	(1)	16	0	0.00
V	65	2	51	(4)	15	13	169.00
Y	54	14	53	(5)	11	3	9.00
Z	54	14	56	(5)	4.5	9.5	90.25
			p=.05				

The -.05 correlation fell significantly short of the .425 coefficient required to establish a statistically significant positive relationship between supervisor and

teacher responses to the LBA II. In fact, the negative coefficient derived suggests that differences existed in the perceptions of teachers and supervisiors as supervisors were projected into the twenty hypothetical situations presented by the LBA II.

Again, an important question - Why? - evolves from this statistical conclusion. A supplemental analysis of the data generated by supervisor and teacher responses to the LBA II helps address this question.

Supplemental Teacher Response Analysis

Table 15 reports the results of teacher responses (T) to the LBA II. Supervisors are ranked based on the mean LBA II score of their teachers. In instances where tied scores occurred, supervisors were successively ranked for clarity of comparative analysis. In addition, the range of teacher responses from high to low is reported as a means of assessing the degree to which teacher perceptions of the supervisor's projected Style Effectiveness varied. The highest attainable score is 80 and the lowest attainable score is 20. The mean teacher response to the LBA II was 55. Comparative summary statements are provided for supervisors ranked 1-4 (Group I), 5-8 (Group II), 9-12 (Group III), and 13-16 (Group IV).

Table 15
LBA II TEACHER RESPONSE ANALYSIS

Group	Rank	Supervisor	Score(I)	(n)	Range(I) (high) (low)	Summary
I	1	S	(59)	(5)	63 - 57= 6	1. average range =9
	2	D	(58)	(5)	63 - 54= 9	2. "low" mean= 53=2 below
	3	O	(58)	(4)	66 - 51=15	3. "high" mean= 63=8 above
	4	Z	(56)	(4)	58 - 51= 7	
II	5	A	(56)	(2)	one response	1. average range=2
	6	B	(55)	(2)	58 - 52= 6	2. "low" mean 51=4 below
	7	F	(55)	(5)	65 - 51=14	3. "high" mean 62=7 above
	8	H	(55)	(5)	64 - 49=15	
III	9	Q	(54)	(4)	56 - 51= 5	1.average range=13
	10	C	(53)	(4)	60 - 46=14	2. "low" mean= 47=8 below
	11	R	(53)	(5)	62 - 42=20	3."high" mean= 60=5 above
	12	Y	(53)	(5)	62 - 50=12	
IV	13	E	(52)	(4)	60 - 43=17	1. average range= 8
	14	T	(52)	(3)	53 - 51= 2	2. "low" mean= 45-7 below
	15	V	(51)	(4)	54 - 50= 4	3. "high" mean= 56=1 above
	16	U	(50)	one response		

Supplemental Teacher Response Analysis Summary

Group I supervisors ranked 1-4 by teachers with whom they work had the second smallest average range of response - 9 points. This suggests that these supervisors are consistently and similarly viewed by their teachers as effective situational leaders with a "high" mean of 63 and a "low" mean of 53. The low mean of 53 (2 points below the total teacher mean score) points up the varied teacher perceptions that existed for this highest ranked group of supervisors.

Teacher perceptions of Group II Supervisors ranked 5-8, varied only slightly from Group I. The average range of response for Group II supervisors increased to 12 points - just a 3 point increase over Group I supervisors. Similarly, the "high" mean of 62 is but a single point lower than Group I supervisors. The varied perception issue identified for Group I supervisors continues to be evident for Group II supervisors whose "low" mean of 51 points is 4 points below the total teacher mean score.

The varied perceptions teachers' hold for their supervisors' Style Effectiveness continues to be evident in the analysis of Group III supervisors. The "high" mean of 60 is but 3 points below Group I's "high" mean of 63. Group III's "low" mean of 47 generates an average response range of 13 - a single point greater than Group II's average response range.

The analysis of teacher responses for Group IV supervisors' Style Effectiveness provides useful insight into the varied teacher perception consideration. Group IV supervisors' average response range of 8 points was the smallest response range of the four groups of supervisors. Although their average response range was smallest of the four groups of supervisors, when compared to Groups I, II and III they were perceived as least skilled.

In summary, the average range of responses for all four groups of supervisors seems to confirm that varied perceptions of supervisors Style Effectiveness do exist. However, the smallest average response ranges for supervisors in Group IV (8 points) suggests that consistent perceptions are not in themselves ultimate determiners of a supervisor's perceived Style Effectiveness. Group I supervisors average response range of 9 points (second smallest) and highest teacher scores on the LBA II suggest that the increased levels of supervisor attainment of Style Effectiveness may be rooted in both consistent perceptions and being skilled in situationally adapting leadership styles to teacher needs.

The perception and skill considerations related to Style Effectiveness will continue with an added analysis of supervisors' self perceptions.

Supplemental Supervisor Response Analysis

Table 16 couples supervisor (S) and teacher (T) LBA II scores. Supervisors are ranked based on their own LBA II scores. In instances of a tie score, supervisors were successively ranked for clarity of comparative analysis. The range between mean teacher score and supervisor score is also reported as an additional means of assessing the degree to which teacher and supervisor perception of Style Effectiveness varied. The mean supervisor response to the LBA II was 59. The Summary portion of Table 16 compares the supervisors' group rankings (I, II, III, IV) with their teachers'.

TABLE 16
LBA II SUPERVISOR RESPONSE ANALYSIS

Group	Rank	Super-visor	Score(S)	Score(T)	(n)	Range (S-T)	Summary
I	1	Q	(69)	(54)	(4)	15	Up from III
	2	V	(65)	(51)	(4)	14	Up from IV
	3	E	(64)	(52)	(4)	12	Up from IV
	4	S	(64)	(59)	(4)	5	Returns
II	5	R	(64)	(53)	(5)	11	Up from III
	6	O	(63)	(58)	(4)	5	Down from I
	7	C	(61)	(53)	(5)	8	Up from III
	8	A	(58)	(56)	(2)	2	Returns
III	9	I	(57)	(52)	(3)	5	Up from IV
	10	C	(61)	(53)	(5)	8	Returns
	11	B	(56)	(55)	(2)	1	Down from II
	12	F	(56)	(55)	(5)	1	Down from II
IV	13	Z	(54)	(56)	(5)	2	Down from I
	14	H	(54)	(55)	(5)	1	Down from II
	15	Y	(54)	(53)	(5)	1	Down fromIII
	16	U	(50)	(47)	(1)	3	Returns

Supplemental Supervisor Response Analysis Summary

The membership of Groups I, II, III and IV, as determined by supervisors' self scores (S) on the LBA II, varied significantly when compared to teacher perceptions (T) of those same supervisors. This finding is consistent with the varied perceptions documented in the previous analysis of clinical supervision effectiveness and similarly identifies the need for consistency in teacher and supervisor perceptions of style effectiveness as an important consideration.

The membership of Group I changed significantly from the first grouping. Supervisor S, with self and teacher scores above the mean and a teacher supervisor point range of 5 was the only supervisor to appear in Group I for both groups. The self scores for the 3 other supervisors in Group I brought them up from their teacher rankings in Groups III and IV - with an average teacher-supervisor point range of 14. The importance of consistency in teacher and supervisor perception of Style Effectiveness and the relationship between supervisors who rate themselves higher or lower than their teachers continues to evolve from the data.

Similarly, in Group II only Supervisor A with a self score just one point below the mean, teacher score above the mean and a teacher supervisor point range of 2, appears in both Group II's An analysis of Group II self and teacher scores adds further importance to the

relationship between supervisors who rate themselves higher or lower than their teachers. Supervisors R and C self scores were above the mean, while their teacher scores were below the mean-Supervisors R and C thus move up to Group II. In contrast, although Supervisor O's self and teacher scores were above the mean, Supervisor O moves down to Group II when ranked in comparison to self scores of supervisors in Group I.

In addition, in Group III only Supervisor C with a self score above the mean, a teacher score two points below the mean and a teacher-supervisor point range of 8 is common to both Group III's. Supervisors B and F with self scores at the mean move down to Group III. Supervisor I with a self score 5 points higher than the teacher score moves up to Group III.

Group IV data provide patterns consistent with those articulated in the analysis of Groups I, II and III. The only supervisor common to both Teacher and Supervisor Group IV is U. Supervisor U's self and teacher perceptions are below their respective means with a teacher-supervisor point range of 3. The remaining supervisors in Group IV - Z, H, Y - self scores, all below the mean, move them down to Group IV.

Demographic Data Analysis

Relevant Teacher and Supervisor demographic response data are summarized in Tables 17 and 18 in an effort to ascertain potentially significant relationships to derived LBA II scores. Sixty-three teacher responses generated a mean of 55 for the LBA II.

The demographic data summary of teacher responses in Table 16 provides some useful insight. First it indicates that teachers who had received some situational leadership training rated their supervisors' Style Effectiveness as one point below the mean of 55. The variation in the LBA II scores in each of the categories - "16+", "11-15", "6-10" and "up to 5" - suggests that total years of working together may not - in itself - be a significant factor in contributing to teacher perceptions of their superivisors' projected Style Effectiveness. The mean score of situational leadership trained teachers (54) may suggest they held somewhat higher expectations for their supervisors to situationally vary leadership styles.

TABLE 17
TEACHER DEMOGRAPHIC DATA ANALYSIS

	Situational Leadership Training	Years with Current Supervisor			
		16+	11-15	6-10	up to 5
Teacher(n)	17 (27%)	9 (53%)	3 (18%)	3 (18%)	2 (11%)
Mean LBA II Score	54	56	50	56	53

Teacher mean LBA II scores for their supervisors are displayed in Table 18. Again, supervisors' years in current role and their situational leadership training status are reported to determine relevance to the Style Effectiveness ranking their teachers gave them. In instances where tied scores occurred, supervisors were again successively ranked for clarity of comparative analysis.

TABLE 18
SUPERVISOR DEMOGRAPHIC DATA ANALYSIS

Group	Rank	Super-visor	LBA II Score(I)(n)		Situational Leadership Training(S) Yes/No	Years in Current Role (S)
I	1	S	59	(4)	no	0-5
	2	D	58	(5)	yes	16+
	3	O	58	(4)	yes	6-10
	4	Z	56	(5)	yes	6-10
II	5	A	56	(2)	no	16+
	6	B	55	(2)	yes	16+
	7	F	55	(2)	no	16+
	8	H	55	(5)	yes	16+
III	9	Q	54	(4)	no	0-5
	10	C	53	(5)	no	16+
	11	R	53	(5)	no	16+
	12	Y	53	(5)	no	16+
IV	13	E	52	(4)	no	0-5
	14	T	52	(3)	no	6-10
	15	V	51	(4)	no	0-5
	16	U	50	(1)	no	0-5

Supervisors in Group I were perceived by teachers as most skilled in situationally varying leadership styles. Three of the four supervisors in Group I indicated receiving situational leadership training and represented all but the "11-15" years experience range. The significance of the training and experience issues increase as the data analysis is extended to Groups II, III and IV.

For instance, 5 of the 8 supervisors (63%) in Groups I and II indicated participation in situational leadership training. In contrast, none of the 8 supervisors in Groups III and IV indicated participation in situational leadership training.

It is difficult to attach great significance to the "years in Current Role" data provided. Although Group IV, viewed as comparatively least skilled by their teachers, contained the least experienced supervisors their uniform lack of situational leadership training makes it difficult to deduce the significance of their experience level. Concurrently, the varied experience levels represented in the maximally style effective Group I supervisors as compared to the seven out of eight "16+" year experience of Groups II and III supervisors further confuses this issue.

In summation, it seems that the issue of situational leadership training emerges as important in increasing teacher perceptions of Style Effectiveness - perhaps exclusive of years of accumulated supervisory experience. The data suggest that the prospect of increasing the Style Effectivness of experienced ("16+") and relatively inexperienced ("0-5", "6-10") supervisors through situational leadership training is very real.

Conclusions

The statistical analysis of teacher and supervisor scores on the LBA II failed to support the relationship stated in Hypothesis II. However, the subsequent supplemental analysis of their responses and related demographic data have provided additional insight important to the development of a process to help supervisors increase their leadership skills and capacity to promote continuous improvement of instruction. This

analysis provided additional insight regarding varied teacher-supervisor perceptions of leadership style effectiveness, the significance of situational leadership training for supervisors and the negligible significance of length of supervisory experience.

There seem to be two dimensions to the varied perceptions of Style Effectiveness evidenced in the data - teacher-teacher and supervisor-teacher. First, varied perceptions exist among teachers working with the same supervisor - as indicated by the specified range of teacher responses for each supervisor. Second, supervisors with high self rating scores were generally viewed as less effective siutational leaders by their teachers.

The demographic data analysis also suggests that situational leadership training positively impacts teachers' perceptions of their supervisors' Style Effectiveness. Style Effectiveness, as a measure of a supervisors' capacity to work with and through people in promoting continuous improvement of instruction emerges as an essential component of a process to continuously promote the improvement of instruction.

The negligible significance of length of supervisory experience, as it related to teachers' perceptions of Style Effectiveness, is viewed as a positive development. The prospect of supervisors generating positive teacher perceptions <u>at any point</u> in their supervisory experience through participation in situational leadership training becomes another important consideration in the development

of a process to promote continuous improvement of instruction.

In conclusion, this analysis of Hypothesis II suggests that a process for helping supervisors increase their clinical supervision effectiveness, in an effort to promote continuous improvement of instruction, needs to include strategies for bringing commonality to teacher-teacher and teacher-supervisor perceptions of Style Effectiveness and accessing situational leadership training for supervisors.

Hypothesis III

Hypothesis III assimilates the teacher perspective addressed in Hypothesis I and II specific to supervisors' clinical supervision and leadership Style Effectiveness. In Hypothesis III teachers' responses to the CSEI and LBA II were examined in an effort to answer two related questions:

1. Were those supervisors given higher CSEI teacher ratings given similarly high LBA II ratings by the teachers they supervised?
2. Was there any demographic information significant to this finding?

Hypothesis III is formally stated as follows: There is a statistically significant relationship between teacher perception of effective clinical supervision experiences as measured by the average score of their responses to the CSEI and the teacher Style Effectiveness rating of their supervisor as measured by responses to the LBA II-Other.

Spearman Rank-difference Results

The Spearman Rank-difference Method, presented in Table 19, was again used as the initial means of assessing the relationship stated in Hypothesis III. The correlation coefficient (p) needed to establish a significant relationship at the .05 level of significance for the 16 supervisors (S) and their corresponding teacher (T) responses to the CSEI and LBA II was .425.

TABLE 19
CSEI/LBA II STATISTICAL RESPONSE ANALYSIS

Super-visor	Teacher CSEI Score	(n)	Rank (T)	Teacher LBA II Score	(n)	Rank (S)	Difference D	D2
A	78	(2)	15	56	(2)	4.5	10.5	110.50
B	82	(2)	14	55	(2)	7	7	49.00
C	87	(5)	11	53	(5)	11	0	0.00
D	125	(5)	2	58	(5)	2.5	.5	0.50
E	104	(4)	6	52	(4)	13.5	7.5	56.25
F	122	(5)	3	55	(5)	7	4	16.00
H	84	(5)	13	55	(5)	7	6	36.00
O	92	(4)	9	58	(4)	2.5	6.5	42.25
Q	126	(5)	1	54	(4)	9	8	64.00
R	111	(5)	4	53	(5)	11	7	49.00
S	105	(4)	5	59	(4)	1	4	16.00
T	95	(4)	8	52	(3)	13.5	5.5	30.25
U	77	(1)	16	50	(1)	16	0	0.00
V	100	(4)	7	51	(4)	15	8	64.00
Y	90	(5)	10	53	(5)	11	1	1.00
Z	85	(5)	2	56	(5)	4.5	7.5	56.25

p=.130

The .130 coeffecient fell short of the .425 coefficient required to establish a statistically significant relationship between teacher responses to the CSEI and LBA II. These data indicate that, based on the results of the CSEI and LBA II, teachers who viewed their supervisors as skilled clinical supervision practitioners did not necessarily project these same supervisors as similarly skilled situational leaders.

Again, the important question - Why? - emerges from this statistical conclusion. Consistent with the initiatives taken with Hypotheses I and II, a supplemental analysis was undertaken to address this question.

Supplemental Teacher Response Analysis

It is useful to contrast the tasks required of teachers in responding to the CSEI and the LBA II. In the case of the CSEI, teachers are asked to respond to statements based on their actual experience with that supervisor. In contrast the LBA II asks teachers to project how their supervisors would respond to a stated hypothetical situation that may or may not have approximated an actual experience with their supervisor. In an effort to more clearly define this issue, teacher responses to the Leadership Elements (items 17-23) of the CSEI were isolated and analyzed to discern the extent to which the hypothetical situations presented in the LBA II effected the relationship between leadership and clinical supervision effectiveness. The Spearman Rank-difference Method was used as the means to ascertain the significance of this actual experience vs. hypothetical situation issue. The correlation coefficient (p) needed to establish a significant relationship at the .05 level of significance was .425. Table 20 presents the results of this supplemental analysis. The highest attainable score on the Leadership Elements is 35.

TABLE 20
CSEI/LEADERSHIP ELEMENTS ANALYSIS

Super-visor	Teacher CSEI Score	(n)	Rank	Teacher Elemen-tary Score	(n)	Rank	Difference D	D2
A	78	(3)	15	21	(3)	15.5	.5	0.25
B	82	(2)	14	21	(2)	15.5	1.5	2.25
C	87	(5)	11	26	(5)	12	1	1.00
D	125	(5)	2	33	(5)	2.5	.5	0.25
E	104	(4)	6	30	(5)	5	1	1.00
F	122	(5)	3	34	(5)	1	2	4.00
H	84	(5)	13	28	(5)	7	5	25.00
O	92	(4)	9	27	(4)	9.5	.5	0.25
Q	126	(5)	1	33	(5)	2.5	1.5	2.25
R	111	(5)	4	32	(5)	4	0	0.00
S	105	(4)	5	28	(4)	7	2	4.00
T	95	(4)	8	27	(4)	9.5	1.5	2.25
U	97	(1)	16	26	(1)	12	4.0	16.00
V	100	(4)	7	28	(4)	7	0	0.00
Y	90	(5)	10	23	(5)	14	4	16.00
Z	85	(5)	2	26	(5)	12	10	100.00

p=.744

The .744 coefficient far exceeded the .425 coefficient required to establish a statistically significant relationship between teacher responses to the CSEI, and responses to the CSEI's subset of Leadership Elements.

Supplemental Teacher Response Analysis Summary

It can be readily deduced from the statistical significance of the .744 coefficient derived that teachers' perceptions of a supervisor's leadership effectiveness correlate with similarly perceived effectiveness as a clinical supervisor. The strength of this correlation suggests that surveying actual experience may be a key consideration in development of a process to improve supervisors' clinical supervision effectiveness.

A related analysis of teachers' demographic data responses further enhances the importance of surveying staff perceptions based on actual experiences of teachers working with their supervisors.

Demographic Data Analysis

Relevant Teacher demographic response data are summarized in Tables 21 and 22 that follow.

The demographic data summary of teacher responses in Table 21 enhances the importance of surveying staff perceptions of leadership effectiveness based on actual experience. Teachers were asked to specify their supervisor's dominant leadership style among "Directing" (D), "Coaching" (C), "Supporting" (S), "Delegating" (De), or a combination (Co) of all four styles. These leadership styles categories are consistent with current Situational Leadership II descriptors. Situational Leadership theory specifies that a supervisor must use a combination (Co) of leadership styles according to specific tasks undertaken by individuals in order to attain a high level of perceived Style Effectiveness. Table 21 provides a profile for each supervisor documenting teachers' perceptions of their Style Effectiveness and the extent to which each group of supervisors used a combination (Co) of task specific leadership styles.

TABLE 21
LEADERSHIP RESPONSE PROFILE

Group	Rank	Supervisor	CSEI Group Mean Score(T)	Total Responses (n)	Profile D	C	S	DE	CO	Group "Combination Percentage
I	1	Q	(126)	5			1		4	80%
	2	D	(125)	5					5	
	3	F	(122)	5			1		4	
	4	R	(111)	5			2		3	
II	5	S	(105)	4		1	1		2	62%
	6	E	(104)	4	1				3	
	7	V	(100)	4					4	
	8	T	(95)	4		1	1		1 1	
III	9	O	(92)	4		1	1		2	63%
	10	Y	(90)	5					2 3	
	11	C	(87)	5			2		1 2	
	12	Z	(85)	5					5	
IV	13	H	(84)	5		2	2		1	
	14	B	(82)	2		1	1			
	15	A	(78)	3			2		1	
	16	U	(77)	1					1	

It is important to remember that Table 21's Group I supervisors were perceived by their teachers as the most skilled clinical supervisors based on their teacher generated CSEI scores. Group I supervisors also yielded the highest percentage (80) of teacher perceived combination (Co) dominant leadership styles.

The profiles of supervisors in Groups II (62%) and III (63%) presented a somewhat lower percentage of teacher perceived combination (Co) dominant leadership styles. This lower Style Effectiveness standing correlates with similarly lower teacher rankings as effective clinical supervisors.

The progression of lower percentage of teacher perceived combination (Co) dominant leadership styles continues for supervisors in Group IV (27%). Group IV supervisors were comparatively viewed as the least effective clinical supervision practitioners.

The demographic data reported in Table 22 provides complimentary insight regarding teacher perceptions of supervisors' leadership style and clinical supervision effectiveness. Table 22 illustrates how teachers with both clinical supervision (CS) and situational leadership (SL) training perceived their supervisors' effectiveness as clinical supervisors. From the previous partial analysis of Hypothesis I reported in Table 12 it is known that clinical supervision trained teachers mean supervisor score on the CSEI was 103 - 4 points above the mean.

TABLE 22
TEACHER SITUATIONAL LEADERSHIP AND
CLINICAL SUPERVISION TRAINING
IMPACT ANALYSIS

Group	Rank	Super-visor	CSEI Score(T)(n)	CSEI Trained CSEI Score(T)	#CS/SL Trained Teachers (n=11)
I	1	Q	(126)	(5) (127)	1
	2	C	(125)	(5)	
	3	F	(122)	(5)	
	4	R	(111)	(5)	
II	5	S	(105)	(4) (129)	1
	6	E	(104)	(4)	
	7	V	(100)	(4) (94)	1
	8	I	(95)	(4)	
III	9	O	(92)	(4) (96)(89)	2
	10	Y	(90)	(5) (61)	1
	11	C	(87)	(5) (112)	1
	12	Z	(85)	(5) (93)(95)	2
IV	13	H	(84)	(5) (91)	1
	14	B	(82)	(2)	
	15	A	(78)	(3) (86)	1
	16	U	(77)	(1)	

An analysis of Table 22 suggests that the clinical supervision and situational leadership trained teachers brought a unique perspective to their supervisors clinical supervision effectiveness. First, these teachers' mean CSEI score was 97 - or two points below the aggregate teacher mean. Their slightly lower mean score suggests that they may have held higher expectations of their supervisors. However, although their mean CSEI scores were slightly lower than their peers, eight of the eleven teachers in this group give their supervisors higher CSEI scores than the supervisors gave themselves. This unique perspective may suggest that teacher participation in both clinical supervision and situational leadership training increases teacher expectations of supervisors' clinical supervision performance and enhances their assessment of their supervisors' clinical supervision effectiveness.

Demographic Data Analysis Summary

The analysis of demographic data suggest that the relationship between teachers' perceptions of supervisors' leadership effectiveness may have significant bearing on those same teachers' perceptions of their supervisors' clinical supervision effectiveness. Data rooted in actual experience seem to have emerged as an important consideration in defining the relationship between supervisors' leadership and clinical supervision effectiveness as perceived by their teachers. And finally, the merits of situational leadership and clinical

supervision training of teachers and the suggested perceptual enhancement of supervisor performance warrants careful consideration.

Conclusions

The statistical analysis of teacher responses to the CSEI and LBA II failed to support the relationship stated in Hypothesis III. However, the subsequent supplemental and demographic data analyses undertaken have suggested that the relationship between teacher perceptions of their supervisors' leadership effectiveness emerges as an important consideration in the development of a process to increase supervisors' clinical supervision effectiveness.

The contrasting results of the statistical analysis when compared to the results of the supplemental and demographic data analyses are interesting. These investigations, related to Hypothesis III, suggest that teacher perception of supervisors' leadership and clinical supervision effectivenss is most accurate when surveyed based on actual experience with that supervisor. The CSEI, based on actual experience, readily lends itself to this consideration while the LBA II's hypothetical or projected orientation is conversely limited. The CSEI emerges as an essential component in the development of a process to help supervisors increase their clinical supervision effectiveness.

As limited as the LBA II may have proven in this particular application, it is important to point out that its theoretical base remained essential in assessing the relationship between teachers' perceptions of supervisors' leadership and clinical supervision effectiveness. More specifically, the Situational Leadership II leadership descriptors used in the demographic data collection - Directing, Coaching, Supporting and Delegating - prove self explanatory to teachers as they defined their supervisors' dominant leadership style. The Situational Leadership II premise that the use of a combination of the specified leadership styles according to task specific situations represents maximum leadership Style Effectiveness was evidenced in the demographic data responses teachers provided and correlated with teacher perceptions of their supervisors' clinical supervision effectiveness. The usefulness of Situational Leadership II theory was reaffirmed as an essential component of a process designed to maximize supervisors' clinical supervision effectiveness.

And finally, the separate analysis of teachers trained in both clinical supervision and situational leadership theory undertaken, points up the worth of related teacher training for promoting positive teacher perceptions as participants in the pursuit of continuous instructional improvement.

Hypothesis IV

Hypothesis IV attempted to determine what relationship exisited between supervisors' perceptions of their own clinical supervision and leadership style effectiveness. Supervisors' responses to the CSEI, LBA II and the Demographic Data Sheet were analyzed in an effort to answer two related questions:

1. Did supervisors who gave themselves higher CSEI self ratings give themselves similarly high LBA II ratings?
2. Was there any demographic information significant to this finding?

Hypothesis IV is formally stated as follows: There is a statistically significant relationship between supervisor perception of effective clinical supervision experiences as measured by the average scores of their responses to the CSEI and their Style Effective rating as measured by their responses to the LBA II-Self.

Spearman Rank-difference Results

As with Hypotheses I, II and III, the Spearman Rank-difference Method was used as the initial means of assessing the relationship stated in Hypothesis IV. The correlation coefficient (p) of .425 continues to be required to establish a statistically significant relationship at the .05 level of significance for the 16 supervisors specified. Table 23 presents the data generated by the supervisor responses to the CSEI and LBA II.

TABLE 23
CSEI/LBA STATISTICAL RESPONSE ANALYSIS

Super-visor	CSEI/LBA Score(S)	Statis-tistical Rank	LBA II Score(S)	Rank	Diffference D	D2
A	103	8.5	58	8	.5	.25
B	90	14	56	11	3	9.00
C	117	1.5	61	7	6.5	42.25
D	112	5	56	11	6	36.00
E	117	1.5	64	4	3.5	12.25
F	110	6	56	11	5	25.00
H	100	11	54	14	3	9.00
O	103	8.5	63	6	1.5	2.25
Q	98	12.5	69	1	11.5	132.00
R	116	3	64	4	1	1.00
S	108	7	64	4	3	9.00
T	88	15	57	9	6	36.00
U	102	10	47	16	6	35.00
V	114	4	65	2	2	4.00
Y	98	12.5	54	14	1.5	2.25
Z	81	16	54	14	2	4.00

p=.470

The .470 coefficient exceeded the .425 coefficient required to establish a statistically significant relationship between supervisor responses to the CSEI and the LBA II. It can be deduced from this statistical relationship that supervisors' perceptions of their own clinical supervision effectiveness and leadership Style Effectiveness are similar. This means that supervisors who scored high in the area of clinical supervision effectiveness on the CSEI scored similarly high in leadership Style Effectiveness on the LBA II. And conversely, the statistical correlation means that supervisors who scored themselves lower on the CSEI scored themselves similarly lower on the LBA II.

Although statistical significance at the .05 level of significance was established, a supplemental and demographic data analysis was undertaken in an effort to gain further insight regarding the self ratings of supervisors on the CSEI and the LBA II.

Supplemental Supervisor Response Analysis-I

Table 24 presents the average CSEI and LBA II self scores for supervisors in Groups I, II, III and IV. The intent of Table 24 is to illustrate patterns in each Group's scores that impact on each Group's self-perceived clinical supervision effectiveness. The aggregate mean score on the CSEI was 98 and the aggregate mean score on the the LBA II was 59. The summary portion of Table 24 compares each group's mean scores to the aggregate mean.

TABLE 24
SUPPLEMENTAL SUPERVISOR RESPONSE ANALYSIS-I

Group	SCEI Score (n)	LBA Score (n)	Summary Aggregate mean (CSEI=98 LBA II=59)
I	(116) (4)	(64) (4)	CSEI -18 points above LBA II- 5 points above
II	(108) (4)	(60) (4)	CSEI -10 points above LBA II- 1 point above
III	(101) (4)	(53) (4)	CSEI - 3 points above LBA II- 6 points below
IV	(89) (4)	(59) (4)	CSEI -10 points below LBA II- at the mean

Supplemental Supervisor Response Analysis Summary-I

Table 24 illustrated the pattern of higher and lower CSEI scores correlating with higher and lower LBA II scores for three of the four supervisory groups. More specifically, the progression of greater clinical

supervision effectiveness and leadership Style Effectiveness to lesser clinical supervision and leadership style effectivenss worked uniformly in moving from Group I to Group II to Group III. However, that uniform progression in CSEI and LBA II scores was altered with Group IV.

Group III with an average CSEI score of 89 comparatively perceived themselves as the least effective clinical supervisors. However, these same supervisors generated an LBA II score 6 points higher than supervisors in Group III and only one point less than supervisors in Group II.

The correlation between Group I, II and III scores derived from the CSEI and LBA II further defines the relationship between clinical supervision effectiveness and leadership Style Effectiveness. However, the differing results for Group IV may serve as a useful reminder that leadership Style Effectiveness is not a sole predictor of clinical supervision effectiveness.

Additional supplemental supervisors' response analysis focused on their responses to the Leadership Elements of the CSEI. This generated further useful insight regarding the relationship between leadership and clinical supervision effectiveness.

Supplemental Supervisor Response Analysis-II

Tables 25 and 26 provide additional data reaffirming the leadership/clinical supervision effectiveness relationship.

Table 25 uses the Spearman Rank-difference Method to derive the statistical significance of the correlation between supervisors' individual scores on the CSEI and their subset scores on the Leadership Elements portion of the CSEI. The highest attainable score on the Leadership Elements portion of the CSEI is 35.

TABLE 25
TEACHER LEADERSHIP ELEMENTS/CSEI GROUP RESPONSE ANALYSIS

Super-visor	CSEI Score(S)	Rank (S)	Leadership Element Score(s)	Rank (S)	Difference D	D2
A	103	8.5	31	10.5	2.0	4.00
B	90	.4	31	10.5	3.5	12.25
C	117	1.5	35	1	.5	.25
D	112	5	33	5.5	.5	.25
E	117	1.5	33	5.5	4.0	16.00
F	110	6	33	5.5	1.5	2.25
H	100	11	34	2.5	8.5	72.25
O	103	8.5	29	13	4.5	20.25
Q	98	12.5	30	12	0.5	.25
R	116	3	34	2.5	0.5	.25
S	108	7	32	8.5	1.5	2.25
T	88	15	28	14	1.0	1.00
U	102	10	33	5.5	4.5	20.25
V	114	4	32	8.5	3.5	12.25
Y	98	12.5	26	15	2.5	6.25
Z	81	16	24	16	0	0.00
			p=.777			

The correlation coefficient of .777 far exceeded the .425 coefficient necessary to establish significance at the .05 level. This statistical finding reaffirms the consistency in supervisors' perceptions in assessing their own leadership and clinical supervision effectiveness.

Table 26 presents the averaged CSEI and Leadership Elements scores for each supervisory group as a means of comparing and contrasting previous Hypothesis IV findings

based on each Group's averaged CSEI and LBA II scores. Again the aggregate mean score on the CSEI was 98 and the aggregate mean score on the Leadership Elements (L.E.) portion of the CSEI was 31. The Summary portion of Table 26 compares each group's mean scores to the aggregrate mean.

TABLE 26
LEADERSHIP ELEMENTS/CSEI GROUP RESPONSE ANALYSIS

Group	CSEI Score (n)	Leadership Elements (L.E.) Score (n)	Summary (Aggregate Means: CSEI=98; Leadership Elements=31)
I	(106) (4)	(34) (4)	CSEI-18 points above L.E.- 3 points above
II	(108) (4)	(32) (4)	CSEI-10 points above L.E.- 1 point above
III	(101 (4)	(31) (4)	CSEI- 3 points above L.E.- at the mean
IV	(89) (4)	(29) (4)	CSEI-10 points below L.E.- 2 points below

Table 26 above reaffirms the dominant pattern of clinical supervision and leadership effectiveness scores that emerged from the analysis of Table 25. The progression of greater clinical supervision effectiveness and leadership style effectiveness to lesser clinical supervision and leadership style effectiveness included Groups I, II, III and IV.

Supplemental Supervisor Response Analysis Summary-II

Tables 25 and 26 reaffirm the significant relationship between leadership and clinical supervision effectiveness and generate two important considerations in the development of a process to increase supervisors' clinical supervision effectiveness. First, such a process

must provide for self assessment and enhancement of leadership and clinical supervision skills. Second, the Leadership Elements portion of the CSEI - with its emphasis on actual experience - emerges as a viable means assessing and potentially enhancing leadership skills.

Demographic Data Analysis

The demographic data presented in Table 27 provide additional insight regarding supervisors' perceptions of their leadership and clinical supervision skills. The status of clinical supervision training, situational leadership training, and self description of dominant leadership style using Situational Leadership II's descriptors - Directing (D), Coaching (C), Supporting (S), Delegating (DE) or a combination (CO) of the style descriptors is indicated. The Group rankings based on related CSEI self scores are provided for common reference.

TABLE 27
SUPERVISOR DEMOGRAPHIC DATA ANALYSIS

Group	Super-visor	CSEI Score(S)	Training(S) C.S.	Training(S) S.L.	Leadership Style(S) D	C	S	DE	CO
I	C	(117)	Yes	No					X
	E	(117)	No	No					X
	R	(116)	Yes	No					X
	V	(114)	No	No			X		
II	D	(112)	Yes	Yes					X
	F	(110)	Yes	No					X
	S	(108)	No	No					X
	O	(103)	Yes	Yes					X
III	A	(103)	Yes	No					X
	U	(102)	No	No					X
	H	(100)	Yes	Yes					X
	Y	(98)	Yes	No					X
IV	Q	(98)	Yes	No					X
	B	(90)	No	Yes	No Response				
	I	(88)	No	No					X
	Z	(81)	Yes	Yes	X				

Demographic Data Analysis Summary

Two interesting issues evolve from the data presented in Table 27. First, 13 of 15 supervisors perceived themselves as predominantly using a leadership style that equated to a combination (Co) of the Situational Leadership II leadership style descriptors. Second, only four of the 16 supervisors reported participation in clinical supervision and situational leadership training. The potential significance of these two issues is addressed in the succeeding paragraphs.

The fact that 13 of 15 supervisors perceived themselves as most often using a combination of leadership styles clearly stands out. This would suggest that these supervisors felt they were consistently adjusting the leadership styles they used according to the situation at hand. This finding also raises the question - To what extent did this overwhelming self perception reflect an appreciation for what should be vs. what actually exists? Supervisor V, indicating a Supporting (S) dominant leadership style and Z, indicating a Directing (D) dominant leadership style present a striking contrast to their peers.

The fact that 13 of 15 supervisors perceived themselves as most often using a combination of leadership styles acquires added significance when the clinical supervision and situational leadership training issues are analyzed. A total of just 5 supervisors indicated

participation in situational leadership training. In addition, although ten supervisors specified accrued clinical supervision training, only four of these ten also had situational leadership training. In spite of the lack of situational leadership training for the majority of these supervisors they seemed to recognize the necessity of using a combination of leadership styles to maximize their leadership effectiveness.

It is also useful to focus briefly on the status of the four supervisors who reported participation in clinical supervision and situational leadership training. None of these supervisors appear in Group I, two (D,O) appear in Group II, one (H) appears in Group III, and one (Z) appears in Group IV. The lower self scores on the CSEI which prevented these supervisors from being included in Group I may reflect higher expectations of themselves as clinical supervisors than those held by their peers without similar training.

Finally, the issues of accuracy of self perception and desirability of appropriately using a combination of leadership styles that have emerged from this demographic data analysis warrant careful consideration for inclusion in a process designed to increase supervisors clinical supervision effectiveness.

Conclusions

The statistical analysis of supervisors' responses to the CSEI and LBA II supported the relationship stated in Hypothesis IV. However, as demonstrated in the analysis of Hypotheses I, II and III, greater understanding of the significance of the statistical analysis was realized through the supplemental and demographic data analysis. The combination of statistical, supplemental and demographic data analysis provided a resounding yes response to the two questions presented at the outset in considering Hypothesis IV.

The first question asked if supervisors who gave themselves higher CSEI self ratings gave themselves similarly high LBA II ratings. The CSEI/LBA II correlation coeffecient of .470, supplemental Leadership Elements/CSEI correlation coefficient of .777 and related supervisory Group analysis provide the basis for answering this question affirmatively. In addition to supporting Hypothesis IV's premise that self perceptions of greater leadership effectiveness equate to greater clinical supervision effectiveness, these data conversely suggest that lower self perceptions of leadership effectiveness may equate to lower self perceptions of clinical supervision effectiveness. These data confirm the consistency that existed in these supervisors' perceptions of themselves as leaders and clinical supervisors.

The second question asked if there was any demographic information significant to the relationship between these supervisors' perceptions of themselves as effective leaders and clinical supervisors. Again this question can be answered in the affirmative. Issues related to self perception of dominant leadership style and participation in situational leadership training emerged as particularly significant. Thirteen of the fifteen responding supervisors describing their dominant leadership style as a combination of Directing, Coaching, Supporting and Delegating suggests their general recognition of the desireability of using varied leadership styles and feeling they possess skill in doing so. The fact that none of four supervisors indicating situational leadership and clinical supervision ranked themselves sufficiently high on the CSEI to be included in Group I raises some interesting questions regarding the extent to which their performance expectations exceeded their peers.

In conclusion, the analysis of Hypothesis IV suggests that a process for helping supervisors increase their clinical supervision skills must provide methodolgies for surveying and enhancing their clinical supervision and situational leadership skills.

Summary

The analysis and exploration of Hypotheses I, II, III and IV have projected several considerations that have importance in the development of a process that promotes continuous improvement of instruction by increasing supervisors' clinical supervision effectiveness. These considerations include synchronizing supervisor and teacher perception of the supervisor's clinical supervision and leadership effectiveness; recognizing the desireability of supervisor and teacher clinical supervision and situational leadership training; undertanding that years of supervisory experience do not seem to play a major part in shaping teachers' perceptions of clinical supervisors' effectiveness; surveying teacher perception of their supervisor's leadership and clinical supervision effectiveness based on actual experience with that supervisor; and recognizing the almost universal desireability that teachers and supervisors place on supervisors' use of a combination of leadership styles. The challenge that lies ahead in Chapter V will be to assimilate these understandings into a process that increases the effectiveness of clinical supervision experiences for teachers.

CHAPTER V

A PROCESS FOR INCREASING CLINICAL SUPERVISION EFFECTIVENESS

Introduction

This process to increase clinical supervision effectiveness is an outgrowth of Chapters I-IV. Chapter V presents a pragmatic supervisory process for increasing clinical supervision effectiveness based on the understandings of the clinical supervision and situational leadership theories gained in Chapters II and IV. It also provide suggestions for continued refinement of this initiative. The process for increasing clinical supervision effectiveness begins with helping the supervisor understand the clinical supervision and situational leadership relationship; further it offers guidelines for gathering and interpreting data and guidelines for acquiring related competencies.

Chapter I documented some of the woes and potentialities associated with instructional supervision. The woes include teachers tolerating instructional supervision but not investing in it (Blumberg, 1974), supervisors often lacking requisite expertise to skillfully perform the task (Hawley, 1982) and the composite experience comprising little more than crisis avoidance

(Harris, 1986). Chapter I also spawned some possible direction for future improvements. These potential improvements included recognizing teachers' varied development levels (Harris, 1986), the importance of collaborative teacher and supervisor involvement (Duke, 1984) and the importance of melding organizational and individual needs through the teacher-supervisor relationship (McGreal, 1983). Situational leadership's emphasis on melding personal and organizational needs through the supervisor's adaptation to varying development levels ensued as a focus for investigation in this study.

A three phased approach was used in an effort to discern the merit in coupling Clinical Supervision and Situational Leadership theory in this pursuit. The first phase of this investigation entailed a review of the literature specific to both theories. The second phase of this investigation identified literature that implicitly suggested the merit of coupling the two theories. And finally a survey of teacher and supervisor perception of situational leadership and clinical supervision effectiveness was offered.

Four hypotheses were formulated in an effort to more clearly define the relationship between the two theories. Hypothesis I was formulated to compare supervisors' self perceptions of clinical supervision effectiveness with their teachers. Hypothesis II attempted to provide a basis

to compare supervisor and teacher perceptions of supervisors' situational leadership effectiveness. Hypothesis III was formulated to compare teacher perceptions of their supervisor's clinical supervision and situational leadership effectiveness. Hypothesis IV compared supervisor self perceptions of clinical supervision and situational leadership effectiveness. The data generated from the responses of 16 supervisors and 66 teachers surveyed were analyzed in the context of each hypothesis.

The analysis of data for each Hypothesis was conducted in three strands. The first strand consisted of a statistical analysis using the Spearman Rank-difference Method. Then a supplemental analysis was undertaken in an effort to identify factors that may have contributed to the statistical correlations derived. And third, issues of importance in developing a process to help supervisors increase their effectiveness as clinical supervisors were identified. In summary, this analysis procedure was designed to maximize the understanding of successful practices that may be replicated by other supervisors. The statistical acceptance or rejection of each hypothesis was viewed as secondary to the increased understanding of the relationship that exists between supervisors and teachers actively engaged in clinical supervision. The combination of the increased understanding of the relationship and

related literature provided the practical and theoretical basis for the process described in this chapter. This suggests that prescribed application of situational leadership theory can increase the effectiveness of clinical supervision experiences for teachers. The four steps that define the process in this chapter are, at times, written in the second person to facilitate supervisors finding personal meaning in the process.

Step I-Understanding the Clincial Supervision and Situational Leadership Relationship

It is essential that a supervisor aspiring to provide teachers with effective clinical supervision experiences first understand the clinical supervision and situational leadership relationship. This relationship is defined in current literature and in the outcomes of this study.

The Literature

You are a dedicated educator who has done extensive reading over the last year in an effort to improve your instructional supervision skills. Your journey began by reading Sergiovanni's (1987) article on excellence in schooling in Educational Leadership. Your interests in clinical supervision were piqued when you noticed this approach to instructional supervison was noted as one of the basic components found in effective schools.

Your interests were sufficiently aroused that you read Goldhammer's (1969) and Cogan's (1973) books on clinical

supervison. These authors' notions of teachers becoming active participants in the improvement of instruction seemed to make good sense to you. Your general impression was that this approach could work. However, since none of your colleagues were using this method, you wondered how successful other supervisors' and teachers' experiences with this approach had been and how best to initiate this approach to instructional supervision.

These considerations generated the need to undertake additional readings.

Your additional reading soon provided a reaffirmation of your initial reaction to Goldhammer's (1969) and Cogan's (1973) books. Research over the last ten years by Reavis (1978), Garman (1982), Lovell and Wiles (1983), and Harris (1986) confirmed what you initially thought - clinical supervision can be effective. However, their research also suggested that clinical supervision placed tremendous responsibility on the supervisor -it wasn't something that could be easily done.

You now had two considerations at hand. First, you had discovered an approach to instructional supervision that was generally recognized as having merit - clinical supervision. Second, it seemed that the complexities of the process and the related supervisor responsibilities might be serving as a deterant to effective wide spread use of clinical supervision. You continued your reading to discern

what needed to be done by today's contemporary supervisor if clinical supervision was to succeed. As you read you were particularly interested in learning what you would need to do to provide successful clinical supervision experiences for teachers. Three success indicators emerged from your investigations: commitment to the growth and development of people (Goldhammer, Krajewski & Anderson, 1980; Lovell & Wiles, 1983; McFaul & Cooper, 1984; McGreal, 1983; Duke, 1986), existence of a positive teacher-supervisor relationship (McGreal, 1983; Goldhammer, Anderson & Krajewski, 1980; Hunter, 1980; Brookover, 1982), and presence of a skilled clinical supervisor (Mattaliano, 1977; Canizaro, 1985; Coombs, Acheson & Gall, 1980; Valverde, 1982). The dominant thought that emerges from your reading thus far is your need to acquire the related skills and understandings necessary to provide each teacher with an effective clincial supervision experience.

As you continue to think about undertaking your clinical supervision initiative you recall a theory of individualizing leadership styles based on individual's motivation and skill in performing a specific task - Situational Leadership (Hersey & Blanchard, 1982). Situational Leadership is based on the premise that people are an organization's most valuable resource, can grow and develop when appropriate combinations of support and direction are provided, and advocates assimilation of

individual and organizational needs. You enthusiastically undertake the task of searching for explicit research that might connect Clinical Supervision and Situational Leadership theory in a manner useful to you. As you seek this information you are discouraged and encouraged at the same time. You are discouraged because you are unsuccessful in finding explicit linkage of the two theories in the literature. However, you are encouraged in frequently noting current literature implicitly linking the two theories by strongly advocating approaches to instructional supervision that are situationally adapted to organizational and individual needs (Canizaro, 1985; Sergiovanni, 1983,84; Sergiovanni & Carver, 1973; Glickman, 1981; Dwyer, 1984; Glatthorn, 1984; Hunter, 1980; Blanchard, Zigarmi & Zigarmi, 1987; Glatthorn, 1984; Scafidel, 1982; Robinson, 1985; Deakin, 1986; Brandt, 1987, Peters & Waterman, 1984; DeBevoise, 1984; Rogers, 1961).

The complimentary nature of the two theories has been reinforced through your reading. The instructional supervision readings reference some of the same major behavior science theories and research that serve as the foundation for Situational Leadership - Maslow (1954), Herzberg (1966), Argyris (1957), McGregor (1960). Another commonality that emerges is the importance of considering teachers and supervisor perceptions (Brandt, 1987; Hall,

Rutherford, Hall & Hurling, 1984; Canizaro, 1985; Brammer, 1973; Hersey & Blanchard, 1982).

The instructional supervision authors' consistent emphasis on the importance of adapting instructional supervision application to the varying development levels of teachers and Blanchard's (1985) similar task specific emphasis seems uncanny - if only a study could be found that would explicitly connect the two theories so the proverbial wheel would not have to be reinvented. Alas, you find this writer's dissertation - which grew out of the same concerns you hold - explicitly linking clinical supervision and situational leadership theory.

The Study

You find the results of this study informative. The results of the study reaffirm some of your early assumptions about the Clinical Supervision/Situational Leadership relationship, confirm many of the findings of the instructional supervision writers you had previously read and underscores the importance of teacher perceptions in providing maximally effective clinical supervision experiences.

The study's investigation of teachers' and supervisors' self perceptions of clinical supervision and situational leadership effectiveness yields three common understandings derived from Hypotheses I and II.

Understanding 1 - Your teachers' perceptions of effectiveness may vay from yours.

Clinical Supervision - Eight supervisors scored themselves higher than their teachers and eight scored themselves lower then their teachers (Table 9).

Situational Leadership - A grouping of ranked supervisors brought a 75% change in grouping content when techer and self score were compared (Table 16).

Understanding 2 - You need to attain consistently postive teacher perceptions of your effectiveness.

Clinical Supervision - Supervisors viewed as most effective had the smallest range of teacher responses (Table 10).

Situational Leadership - The smaller the range of positive teacher response, the more appropriately viewed the leadership style (Table 15).

Understanding 3 - Your effectiveness may be determined by the skills you and the teacher bring to the experience.

Clinical Supervision and Situation Leadership - Woring relations over thime did not appear as important as the expertise brought to the task. Related training for teachers and supervisors was a positive influence (Tables, 12, 13, 17, 18, 22).

How then do these common clinical supervision and situational leadership understandings come together? Additional understandings related to Hypothesis III provide you with further insight.

Understanding 4 - Your teachers' perceptions of your clinical supervision effectiveness may increase as you apply combinations of leadership styles that match their development needs specific to the improvement of instruction.

Clinical Supervision and Situational Leadership - Eighty (80) percent of these supervisors ranked ans most effective clinical supervisors by their teachers were viewed by these same teachers as skilled in situationally varying their leadership styles. Only 27% of those supervisors viewed as least effective clinical supervisors were viewed as skilled in situationally varying their leadership styles (Table 21).

The final understanding from this study comes from the investigation of Hypothesis IV and serves as an important reminder of the significance of Understandings 1, 2, 3, and 4.

Understanding 5 - You need to incorporate your teachers' perceptions of your clinical supervisor and situational leadership effectiveness-based on actual experience to provide them with effective experiences.

Clinical Supervision and Situational Leadership - Supervisors seemed to have a tendency to view themselves as similarly low or high in situational leadership and clinical supervision effectiveness (Tables 24, 26).

You now have an understanding of current literature advocating the merits of situationally adapting leadership style to individual's development levels and a study that reinforces that notion and provides a basis for action. You need some next steps to pursue your plan of action.

Step 2-Data Gathering

You are now ready for the second step in this process - generating self and teacher perceptions of your clinical supervision and situational leadership effectiveness.

You can use the Canizaro Self Evaluation Instrument, the Leader Behavior Analysis II and a survey of your

dominant leadership style to generate these perceptions. Both the CSEI and the LBA II have Self and Other forms.

Your use of the CSEI is the most important part of gathering information. The CSEI was an extremely useful tool in generating teacher and supervisor perceptions of clinical supervision and leadership skills in the study. Your use of the Self and Other forms of the CSEI will provide you with a means of contrasting supervisor and teacher perceptions. The responses you will get from the CSEI require reflection based on actual experience working together. Responses based on actual experience proved most accurate in the study.

You may want to use the LBA II - Self as a supplemental data gathering instrument. The non educational, hypothetical orientation of the LBA II - Other limits its usefulness in increasing the effectiveness of clinical supervision experience for teachers. Teacher responses to this instrument in the study differed greatly from their responses based on actual experience. The LBA II - Self should be administered as a means of projecting your own situational leadership Style Effectiveness and generating directions for growth and development in general application of situational leadership theory. You need some means of testing your understanding of how to vary your leadership style to address different situations.

At last, the final data gathering step is to survey teacher perceptions of your dominant leadership style. As was done in the study, you can use the Situational Leadership II specific terminologies of Directing, Coaching, Supporting and Delegating and Combination.

Your administration of the CSEI - Self and Other, LBA II - Self and your teachers perceived identification of your dominant leadership style provide the information necessary to generate clinical supervision and situational leadership strategies to increase the effectiveness of teachers' clinical supervision experiences.

Step 3-Guidelines for Interpreting Data

Interpreting the information generated by the CSEI, LBA II and a survey of dominant situational leadership styles is the most critical component of the process to increase your clinical supervision effectiveness.

Your responses and teacher responses to the CSEI should be considered in three different dimensions. The first dimension is to note overall supervisor and teacher scores. The second dimension is to break out teacher and supervisor Leadership Elements (CSEI items 17-23) scores. The third, and most important dimension is for you to identify the extent of the gap that exists between the individual teacher and supervisor's perceptions of clinical supervision and leadership effectiveness. The significance of these data is found in overall ratings and in the extent

of individual teacher supervisor perceptual gap that exists. You now know from your understanding of the clinical supervision and situational leadership relationship that existence of individual perceptual gaps, regardless of score should become a consideration for improvement-high scores and narrow perceptual gaps are the desired goals.

The data from the LBA II - Self should be interpreted following the transfer of responses into a Style Effectiveness score as prescribed by the instrument. A high Style Effectiveness score represents a projection of your skillfully varying leadership styles to match the development levels of individuals and groups. Conversely, a low Style Effectiveness score represents your need to improve adaptation of leadership skills to individual or group development levels. Your Style Effectiveness should be used as a measure of how well you use a combination of situationally appropriate leadership styles - the higher the score, the more skilled the style application. High Style Effectiveness scores are one indication of your current skill level in appropriately using a combination of leadership styles where allocations of directive and supportive supervisory behavior match the levels of skill and motivation the individual brings to the task at hand.

Your teachers' perceptions of your dominant leadership style serves as a cross reference to your LBA II - Self results. In the case of conflicting results, teacher perception of your dominant leadership style based on actual experience should be given greater credence.

Your chances of providing teachers with effective clinical supervision experiences may be increased when these success ingredients exist:

1. high CSEI - Self and Other scores
2. high CSEI - Self and Other Leadership Elements scores
3. teacher perception of your use of a Combination of leadership styles

The extent to which the data generated vary from these ingredients should become the focus for your continuous pursuit of related competencies.

Step 4-Guidelines for Acquiring Competencies

Development of your skills to maximize the effectiveness of clinical supervision experiences for teachers is a continuous pursuit. As uninviting as an unending task may be, the means for using one-self as an instrument for growth and development (Bunker, 1977, Valverde, 1982) provides a unique opportunity. What follows are some practical suggestions to begin that journey.

This study suggested that your years of supervisory experience did not appear to be critical in determining teacher perceptions of your effectiveness. An appreciation that the skills you need to promote effective clinical supervision practices can be attained at any point in time has universal importance in shaping positive supervisor attitudes toward future skill acquisition. Your appreciation and positive attitude toward continuous growth and development serve as the foundation for future skill acquisition.

Use data from the CSEI as your roadmap in attaining needed competencies. Based on the results of this study, demonstrating how differing perceptions can be, modified use of the CSEI is suggested to promote this end. The CSEI suggests that you identify steps for improvement immediately following completion of the self evaluation component. Rather, it is strongly recommended that your course for improvement as prescribed by the CSEI not be initiated until the following is undertaken.

1. Review the teacher responses
2. Identify individual teacher and group perceptual gaps that exist
3. Make identified group-common perceptual gaps a primary focus for improvement
4. Make identified individual perceptual gaps a secondary focus for improvement

5. Review the group-common individual differences that exist specific to the Leadership Elements of the CSEI

These modifications to the CSEI's prescribed procedures, based on the results of this study, are recommended to insure primary emphasis on skill acquistion most important to teacher perception of your effectiveness. Once these modifications have been made it is recommended that the CSEI professional growth component be used as prescribed.

The data generated from the teachers' perceptions of the your dominant leadership style (i.e. Combination, Directing, Coaching, Supporting, and Delegating) and LBA II- Self provide situational leadership improvement directions. It is recommended that the LBA II - Self Directions for Scoring (Appendix D) be fully utilized as prescribed. The Style Effectiveness score is a primary indication of your capacity to appropriately use a combination of leadership styles as they best match an individual or groups development level specific to a given task. The primary importance in scoring the LBA II - Self is to establish a baseline of your competence in discerning the skills and motivation levels individuals bring to a specific task. Your goal is to strive to become skilled in your use of support and direction as you work with teachers engaged in clinical supervision.

Finally, but certainly not last in importance, there is the consideration of clinical supervision and situation leadership training. Your participation in clinical supervision and situational leadership training is recommended. More specifically it is recommended that the process for improving clinical supervision effectiveness that has emerged from this study be used as a component in determining your training content. It may be that participation in reiterations of clinical supervision and situational leadership theory may suffice. However, the data generated from the process you will have followed may prove useful in providing related training programs that are necessarily specific to your environment and the teacher-supervisor relationships you have established.

Process Summary

This process to improve clinical supervision experiences for teachers can be summarized in outline form.

I. Understand the Clinical Supervision and Situational Leadership Relationship

   A. teacher and supervisor perceptions of effectiveness vary

   B. supervisor use of a combination of leadership sytles that match teacher clinical supervision development levels may increase the effectiveness of the experience for teachers

II. Gather Data

A. administer CSEI - Self

B. administer CSEI - Other

C. administer LBA II - Self

D. survey teacher perception of dominant leadership style

III. Interpret Data

A. compare/contrast CSEI-Self and Other scores

B. compare/contrast CSEI-Self and Other Leadership Elements scores

C. identify teacher perception of supervisor's dominant leadership style

D. compare/contrast LBA II - Self scores with teacher perception

E. interpret all data in the context of the success ingredients of the process

IV. Acquiring Competencies

A. identify individual and group perceptual differences between supervisor and teacher(s) responses to the CSEI

B. identify individual and group perceptual differences between supervisor and teacher(s) responses to the Leadership Elements of CSEI

C. focus CSEI professional improvement plan on group and individual perceptual differences

D. use the LBA II - Self Style Effectiveness score and teacher perceptions of dominant leadership style as a guide to acquisition of needed situational leadership skills

The process that has evolved from this study is offered as a means of helping supervisors attain the clinical supervision and situational competencies identified as important in maximizing the effectiveness of clinical supervision experiences for teachers.

Recommendations Related to the Literature and Research

Several recommendations are generated from this study. These recommendations generally reinforce continued development of an individualized process that increases the effectiveness of clinical supervision experiences for teachers. This pursuit is consistent with McGreal's (1983) suggestion that practical guidelines for supervisors are needed to promote the effective use of clinical supervision. This study in its review of the literature, analysis of data and formulation of a related process to increase clinical supervision effectiveness has provided a direction for enhancing clinical supervision practices.

The literature and research were consistent in identifying the important part perceptions play in the teacher-supervisor relationship. The CSEI is recommended for further use as prescribed in this study. The CSEI proved effective in specifying perceptual differences based on actual teacher-supervisor experiences.

The literature (Walter, Caldwell & Marshall, 1980) and research were also consistent in identifying both teacher and supervisor recognition of a combination of leadership

styles as preferred. Solicitation of teacher perspectives on their supervisor's situationally appropriate use of a combination of leadership styles seems to be most accurately generated from actual experience. The LBA II - Other, with its projected non- clinical supervision specific orientation, should be recognized for its limitations in this pursuit.

The process that has emerged from this study serves as a vehicle for defining individual professional development plans. It is recommended that the process be used in a cyclical fashion where extent of and focus for increased competencies is determined by perodic use of the process. Individuals' need and capacity for self growth as documented by Bunker (1977) Valverde (1982) Lovell and Wiles (1983) and Duke (1986) serve as the cornerstone of this process. The study's suggestion that supervisors at all stages of their careers may have the capacity to be maximally successful clinical supervisors is consistent with the literature. The directions that individualized professional development plans take in pursuit of skilled application of clinical supervision and situational leadership theory may be as many and varied as the environments in which they are undertaken.

The mechanics of the process point up the shortcomings of self evaluation. Again, the literature (Mattaliano, 1977; Glickman, 1981; Hersey & Blanchard 1982; Andrews,

1987) and the analysis of the data generated by this study reaffirm the critical importance of understanding self and others perceptions prior to undertaking professional development initiatives.

Finally, it is recommended that this process, as it has emerged from the literature and this study be viewed as a small step toward establishing a supervisory model that enhances clinical supervision applications and promotes the continuous improvement of instruction. In an effort to faciliate continuous improvement of instruction this study has attempted to provide practical strategies designed to promote the development of human resources, enhance the teacher-supervisor relationship, and provide direction for increasing clinical supervisors' competencies. It is recommended that this process for improving clinical supervision experiences for teachers be viewed as a beginning - something to be used, tinkered with, refined, and altered through actual experience.

Recommendations for Further Research

This study clearly points up the need for further research in understanding the potential worth in combining practical applications of clinical supervision and situational leadership theory.

The development of a situational leadership instrument that is task specific to clinical supervision could be a major contribution in further increasing the effectiveness

of clinical supervision experiences for teachers. Ideally, this instrumentation might identify teacher and supervisor development levels specific to clinical supervision. Identification of these development levels could be used as the basis for the development of strategies for growth.

Research that defines the requisite content of maximally effective common situational leadership training for clinical supervisors and teachers might promote more consistently effective clinical supervision practices.

In addition, research that compares and contrasts teacher perceptions of commonly trained supervisors and peer coaches may generate insight useful in promoting effective clinical supervision practices. Some of the literature suggests that teacher perceptions of their supervisors can be connected to student achievement. Studies undertaken to more clearly define this relationship might focus on environments where teacher perceptions of clinical supervision effectiveness are particlularly strong. An analysis of why those perceptions exist may explicitly connect higher levels of student achievement with higher levels of clinical supervision effectiveness.

In conclusion, longitudinal studies of teachers and supervisors engaged in the process advocated in this study or an adaptation of it is encouraged. Insights gained from analysis of several cycles of improvement may prove useful in attaining a more complete understanding of how clinical supervision and situational leadership theory may be combined to promote continuous improvement of instructional effectiveness.

APPENDIX A

Participant Introduction

MEMO TO: Manchester and East Hartford, Connecticut Study Participants

FROM: Stephen J. Lobban, Principal, Gateway Regional Elementary Schools, Huntington, Massachusetts, D. Ed. Candidate Instructional Leadership, University of Massachusetts

Dear Colleague,

I am a graduate student at the University of Massachusetts in Amherst and principal of Gateway Regional's Elementary Schools in Huntington, Massachusetts. As a principal for more than a decade, I have had a long standing interest in supervision techniques that effectively promote continuous improvement of instruction. During the last two years my research has focused on the relationship between Clinical Supervision and Situational Leadership. I am interested in learning if supervisors who are perceived as skilled in situationally adapting their leadership styles are perceived as similarly skilled as clinical supervisors. I am seeking teacher and supervisor volunteers to respond to two surveys that will help define this relationship. My goal is to develop a process that helps supervisors effectively promote continuous improvement of instruction.

The purpose of this study is to promote effective clinical supervision practices. Your honest input is the first step in my pursuit to develop a process that enhances clinical supervision practices.

<u>You have the information needed</u> to help your colleagues have <u>positive supervision experiences</u>. Your experiences with clinical supervision are extremely valuable! Please take advantage of this opportunity to help others learn from your valuable experience. You may at any time, solely at your discretion, terminate your involvement in this study.

* * * * * * * * *STUDY RESULTS* * * * * * * * *

The two enclosed surveys will be administered to approximately 25 supervisors and 125 teachers selected from the Manchester and East Hartford public schools as dissertation research. Responses to these surveys are based on the perceptions of participating supervisors and teachers. Responses to these surveys will be coded to insure anonymity. <u>Your personal responses will be merged with all returns and will in no way reflect back to you or your institution.</u>

Results of responses to these surveys will be reported as anonymous statistical correlations in the dissertation entitled "An Analysis of the Relationship Between Clinical Supervision and Situational Leadership: The Development of a Process to Increase Clinical Supervision Effectiveness".

There are no correct responses. The best responses are those that truly reflect your perceptions.

* * * * * * * * FEEDBACK * * * * * * * *

Please accept the enclosed, specially inscribed pencil as a small token of my appreciation for your time and assistance and as a reminder that as educators - WE HAVE THE POWER TO MAKE A DIFFERENCE!

Please respond to the two enclosed surveys. Following completion of the surveys, please complete the enclosed Data Sheet. Remember to include your code on the surveys and data sheets. Return the two completed surveys and Data Sheet in their enclosed stamped self-addressed envelope. If you would like a copy of a summary of the results please complete and return the enclosed stamped, self-addressed post card. This should be mailed separately from the surveys to insure anonymity.

Your participation in this research project constitutes your confirmation that you have read and understood the above information and fully consent to the anonymous uses of collected data as outlined in this memorandum.

In participating in this study, you are also assuring me that you will make no financial claims for use of your data and that no medical treatment will be required by you from the University of Massachusetts should any physical injury result from participating in this study.

THANK YOU VERY MUCH FOR YOUR VALUABLE PARTICIPATION AND SUPPORT!

PLEASE MAIL YOUR COMPLETED PACKET IMMEDIATELY UPON COMPLETION

CODE _____

APPENDIX B

LBA II

Leader Behavior Analysis II

Developed by Kenneth H. Blanchard, Ronald K. Hambleton, Drea Zigarmi, Douglas Forsyth

Self
Perceptions of Leadership Style

Directions:

The purpose of LBA II-Self is to provide you with information about your perceptions of your own leadership style. The instrument consists of twenty typical job situations that involve a leader and one or more staff members. Following each situation are four possible actions that a leader may take. Assume that you are the leader involved in each of the twenty situations. In each of the situations you must choose one of the four leader decisions. CIRCLE the letter of the decision which you think would most closely describe YOUR behavior in the situation presented. Circle only one choice.

Blanchard Training and Development, Inc.

A Human Resource Development Company

125 State Place, Escondido, CA 92025
(619) 489-5005

2nd Printing

C D E F G

(Form A)

LEADER BEHAVIOR ANALYSIS II-SELF

1. You have asked one of your subordinates to write a report concerning the acquisition of some new equipment for your division. She usually can be given an assignment and it is completed on time with encouragement from you. The report is now overdue. YOU WOULD . . .

   a. Tell her you want the report, explain what you want in the report, and check on her performance daily.

   b. Give her more time to complete the assignment.

   c. Tell her what you expect, when you want the report completed, but discuss with her why the report is late.

   d. Talk to her and encourage her to complete the report.

2. The interdepartment task force that you manage has been working hard to complete its division-wide report. You have been assigned a new task force member. He must complete some cost figures for his department by next week but knows nothing about the task force's requirements or the format of the report. He is excited and enthused about learning more concerning his role on the task force. YOU WOULD . . .

   a. Tell him exactly what is needed in this report and closely monitor his progress.

   b. Ask if there is anything you can do to help him and support his excitement about being a new task force member.

   c. Specify the report format and information requirements but incorporate any ideas or suggestions he may have.

   d. Welcome him to the team, put him in touch with other members of the task force who could help him get ready to present the cost figures.

3. Recently, you have begun to have trouble with one of the people you supervise. He has become lackadaisical, and only your constant prodding has brought about task completion. Because of past experience with him, you suspect he may not have all the expertise needed to complete the high priority task you have given him. YOU WOULD . . .

   a. Continue to direct and follow up on his efforts to complete this task.

   b. Continue to closely supervise his work and try to draw out his attitudes and feelings concerning this task assignment.

   c. Involve him in problem-solving with this task, offer support, and use his ideas in the task completion.

   d. Let him know this is an important task and ask him to contact you if he has any questions or problems.

4. Your group usually functions effectively with encouragement and direction from you. Despite your continued support and direction, their performance has dropped off drastically. The group needs more expertise and experience to increase performance. Your boss has become concerned. YOU WOULD . . .

   a. Emphasize the need for better performance and ask the group to work out their problems by themselves.

   b. Make sure that deadlines are met and the quality of the work is good, but talk with the group to get its recommendations.

   c. Inform the group of exactly what you expect, when it is needed, what some of the consequences could be if poor performance continues, and frequently check performance.

   d. Help the group determine what needs to be done and encourage them to take the necessary steps.

5. Because of budget restrictions imposed on your department, it is necessary to consolidate. You have asked a highly experienced member of your department to take charge of the consolidation. This person has worked in all areas of your department. In the past, she has usually been eager to help. While you feel she has the ability to perform this assignment, she seems indifferent to the importance of the task. YOU WOULD . . .

   a. Take charge of the consolidation but make sure you hear her suggestions.

   b. Assign the project to her and let her determine how to accomplish it.

   c. Discuss the situation with her. Encourage her to accept the assignment in light of her skills and experience.

   d. Take charge of the consolidation and indicate to her precisely what to do. Supervise her work closely.

6. A highly productive and efficient woman on your staff has asked for your help on a task. She is accustomed to working effectively on her own. Recently, some work problems have developed that she feels she can't solve by herself. YOU WOULD . . .

   a. Analyze the problems and outline methods to solve them.

   b. Continue to allow her to figure out an appropriate solution independently.

   c. Determine and implement an appropriate solution, but work with her in problem-solving.

   d. Discuss the problems with her and support her efforts to find appropriate solutions.

7. You have asked one of your senior employees to take on a new job. In his other responsibilities, he has performed well with support from you. The job you have asked him to do is important to the future of your work group. He is excited about the new assignment but doesn't know where to begin because of his lack of experience with this task. YOU WOULD . . .

   a. Discuss the job with him, supporting his ability to do it. Emphasize his outstanding performance in the past.
   b. Define the activities necessary to successfully complete the job and regularly check to see how things are going.
   c. Give him the assignment and let him determine how to do the job. Tell him to call you if there are any problems.
   d. Specify what he is to do, but include any ideas he may have.

8. One of your staff is feeling insecure about a job you have assigned to him. He is highly competent and you know that he has the skills to complete the assignment successfully and efficiently. YOU WOULD . . .

   a. Listen to his concerns and let him know you have confidence in his ability to complete the assignment.
   b. Structure the assignment so that it is clear, but consider any helpful suggestions he may have.
   c. Tell him exactly what to do to get the job done and check his work daily.
   d. Let him figure out how to do the assignment on his own.

9. Your staff has asked you to consider a change in their work schedule. In the past, you have encouraged and supported their suggestions. In this case, your staff is well aware of the need for change and is ready to suggest and try an alternate schedule. Members are very competent and work well together as a group. YOU WOULD . . .

   a. Allow staff involvement in developing the new schedule and support the suggestions of group members.
   b. Design and implement the new schedule yourself, but incorporate staff recommendations.
   c. Allow the staff to formulate and implement the new schedule on its own.
   d. Design the new schedule yourself and closely direct its implementation.

10. You have arrived thirty minutes late for a meeting with your staff. When you arrive, the meeting still has not started. Investigation reveals that a couple of members tried to start the meeting but most group members were discouraged because of lack of group member cooperation. This situation surprises you because the group's progress on this project has been going well. YOU WOULD . . .

    a. Restate the purpose of the meeting, then let the group function without any direction from you unless they ask for your help.
    b. Take control immediately and direct the group toward project completion.
    c. Direct their interaction towards task completion and encourage group members to discuss problems and feelings.
    d. Ask the group to continue to discuss the assigned task and provide as much support and encouragement as possible.

11. A member of your department has had a fine record of accomplishment with your support and encouragement but little direction. He has been given similar tasks to accomplish for the coming year and you must decide how to supervise him. YOU WOULD . . .

    a. Let him function by himself providing his own support and direction.
    b. Emphasize to him the importance of meeting deadlines and direct his efforts at accomplishing assigned tasks.
    c. Talk with him and set goals and objectives for his task accomplishment, but consider his suggestions.
    d. Involve him in setting goals and support his efforts.

12. In the past, you worked closely with your staff directing and supporting their efforts. Productivity is high and people get along well together. Recognizing their abilities, you feel they can now work more on their own. You have redirected your energies to new areas and they have continued to produce good results. You must now ask them to accept additional work. YOU WOULD . . .

    a. Assign the work to them, make sure they know exactly what to do, and supervise them closely.
    b. Give them the job. Tell them that you are pleased with their past performance and that you are sure they will do well with this assignment.
    c. Make sure they know what you want them to do, but incorporate any helpful suggestions they may have.
    d. Let them determine how to complete the assignment.

13. You recently have been assigned a new employee who will perform an important job in your office. Even though he is inexperienced, he is enthusiastic and feels he has the confidence to do the job. YOU WOULD . . .

    a. Let him determine what the job entails and how to do it.
    b. Tell him exactly what the job entails, what you expect of him and monitor his work closely and frequently.
    c. Let him know what you want him to do, but see if he has any suggestions or ideas.
    d. Encourage and praise his enthusiasm and ask him how he would tackle the job.

14. Your boss has asked that your division increase its productivity 10%. You know this can be done, but it will require your active involvement. To free yourself to do this, you must reassign the task of developing a new cost control system to one of your divisional employees. The person to whom you are thinking of assigning the task has had considerable experience with cost control systems, but she is a little unsure about doing this task on her own. YOU WOULD . . .

a. Ask her to take on the project. Encourage and support her efforts.

b. Discuss the project with her. Explain how you want the job done, but see if she has any ideas.

c. Assign her the project and let her determine how to do it.

d. Assign her the project and prepare a detailed memo explaining all the steps necessary to get the project done.

15. One of your subordinates has made a suggestion for change in the operations of the unit that makes sense to you. In the past, she has been able to offer and implement other helpful suggestions in a productive manner with your support and encouragement. You have confidence in her abilities. YOU WOULD . . .

a. Take charge of the suggestion and direct her in its implementation.

b. Discuss the suggestion with her, and support her efforts to direct its implementation.

c. Organize the implementation, but include her ideas.

d. Give her the responsibility for implementing the suggestion without involvement from you.

16. Due to illness in your family, you have been forced to miss the first two meetings of a committee under your direction. You have found, upon attending the third meeting, that the committee is functioning well and making good progress toward completion of its goals. You are unsure about how you fit into the group and what your role should be. YOU WOULD . . .

a. Attend, but let the group continue to work as it has during the first two meetings.

b. Assume the leadership of the committee and begin to direct its activities.

c. Do what you can to make the committee feel important and involved, and support their past efforts.

d. Direct the activities of the group, but incorporate group members' suggestions.

17. Your staff is very competent and able to work well on their own. You have generally left them alone and delegated key responsibilities to individual members. Their performance has been outstanding. YOU WOULD . . .

a. Provide continual support and encouragement to group members.

b. Direct and closely supervise the activities of your staff.

c. Continue to let the group work on its own.

d. Direct their efforts, but work closely with your staff to solicit their suggestions.

18. You and your superiors have decided that a new procedure has to be installed in your department if long-term gains in performance are to be obtained. In the past, when new procedures were installed, your group has been eager to use them but has initially lacked the skills to do so. YOU WOULD . . .

a. Make sure that you direct the implementation of the new procedure, but involve the group in discussing alternatives.

b. Closely direct the group in their initial use of the new procedure.

c. Get the group involved in a discussion of the new procedure and encourage their cooperation and involvement.

d. Allow the group to formulate and implement the new procedure on its own.

19. You have been recently appointed the head of a division. Under the division's former boss, the staff functioned adequately with considerable support and encouragement. Since you have taken over, however, the staff appears to be more concerned with social activities than with carrying out their responsibilities. The staff's performance to date has been poor. YOU WOULD . . .

a. Discuss the staff's low performance with them and support their efforts to specify corrective measures.

b. Direct and organize the necessary corrective action, but solicit input and suggestions from the group.

c. Point out the problem and allow staff members to define their own responsibilities and tasks.

d. Define roles, responsibilities and outcomes and frequently check to see if their performance is improving.

20. One of your employees is reluctant to take on a new assignment. She has had little experience in the area in which you want her to work. She has done a good job with other tasks you have given her. YOU WOULD . . .

a. Explain to her what must be done and how to do it, but listen to why she is reluctant to do the task.

b. Give her the new assignment and let her determine the best way to do it.

c. Encourage her to try the job and facilitate her efforts through mutual problem-solving.

d. Tell her exactly what must be done to successfully complete the assignment and frequently monitor the results.

CODE_____

APPENDIX C

LBA II

Leader Behavior Analysis II

Developed by Kenneth H. Blanchard, Ronald K. Hambleton, Drea Zigarmi, Douglas Forsyth

Other

Perceptions of Leadership Style

Directions:

The purpose of the LBA II-Other is to provide a leader with information about your perceptions of his/her leadership style. The instrument consists of twenty typical job situations that involve a leader and one or more staff members. Following each situation are four possible actions that a leader may take.

Assume_____

is involved in each of the twenty situations. In each of the situations you must choose one of the four leader decisions. CIRCLE the letter of the decision which you think would best describe the behavior of this leader in the situation presented. Circle only one choice.

Blanchard Training and Development, Inc.

A Human Resource Development Company

125 State Place. Escondido. CA 92025
(619) 489-5005

2nd Printing

B C D E F G

(Form A)

LEADER BEHAVIOR ANALYSIS II-OTHER

1. A subordinate has been asked to write a report concerning the acquisition of some new equipment for the division. She usually can be given an assignment and complete it on time with encouragement from this leader. The report is now overdue. THIS LEADER WOULD . . .

   a. Tell the subordinate when the report was due, remind her of what is wanted in the report, and check on the subordinate's progress daily.

   b. Give the subordinate more time to complete the assignment.

   c. Tell the subordinate what is expected, and direct her to complete it as soon as possible, but discuss with her why the report was late.

   d. Talk to the subordinate and encourage her to complete the report.

2. This leader is in charge of an interdepartmental task force that has been working hard to complete its division-wide report. A new member has joined the task force. He must complete some cost figures on his department for the task force meeting next week, but knows nothing about the task force's requirements or the format of the report. The new task force member is excited and enthused about learning more concerning his role on the task force. THIS LEADER WOULD . . .

   a. Tell him exactly what is needed in this report and closely monitor his progress.

   b. Ask the new member if there is anything that can be done to help him, and support his excitement about being a new task force member.

   c. Specify the report format and information requirements but incorporate any ideas or suggestions he may have.

   d. Welcome him to the team, put him in contact with other task force members who could help him get ready to present the cost figures.

3. Recently, this leader has begun to have trouble with one of the people he/she supervises. The subordinate has become lackadaisical, and only the manager's constant prodding has brought about task completion. Because of past history, the manager suspects the subordinate may not have all the expertise needed to complete the high priority task assigned to him. THIS LEADER WOULD . . .

   a. Direct and follow up on the subordinate's efforts to complete the task.

   b. Closely supervise the subordinate's work, yet try to draw out his/her attitudes and feelings concerning this task assignment.

   c. Involve the subordinate in problem-solving around this task and support the employee by using his/her ideas in completing the task.

   d. Let the subordinate know that this is an important task and ask the employee to call if he/she has any questions or problems.

4. This manager's work group has usually functioned effectively with encouragement and direction from the manager. Despite the manager's continual support and direction, the group's performance has dropped drastically. The group feels they need more skills and experience in order to be able to increase performance. The manager's boss is becoming concerned. THIS LEADER WOULD . . .

   a. Emphasize the need for better performance and ask the group to work out their problems by themselves.

   b. Make sure that deadlines are met and the quality of the work is good, but talk with the group to get its recommendations.

   c. Inform the group of exactly what is expected, when it is needed, and what some of the consequences of continued poor performance could be. The leader would also frequently monitor the group's performance.

   d. Help the group determine what needs to be done and encourage them to take the necessary steps.

5. Because of budget restrictions imposed on the department, it is necessary to consolidate. The leader has asked a highly experienced member of the department, who is usually eager to help, to take charge of the consolidation. This person has worked in all areas of the department. While the leader feels the subordinate has the ability to perform this assignment, the subordinate seems indifferent to the importance of the task. THIS LEADER WOULD . . .

   a. Take charge of the consolidation, but make sure the subordinate's suggestions are heard.

   b. Assign the project to her and let her determine how to accomplish it.

   c. Discuss the situation with her. Encourage her to accept the assignment in light of her skills and experience.

   d. Take charge of the consolidation and indicate to the subordinate precisely what to do. Supervise her work closely.

6. A highly productive and efficient woman on the staff has asked for help on a project. She is accustomed to working effectively on her own. Recently, work problems have developed that she feels she can't solve by herself. THIS LEADER WOULD . . .

   a. Analyze the problems and outline methods to solve them.

   b. Continue to allow her to figure out an appropriate solution independently.

   c. Work with her in problem-solving, but determine and implement an appropriate solution.

   d. Discuss the problems with her and encourage her to implement any solutions.

7. This leader has asked a senior employee to take on a new job. In his other responsibilities he has performed well with support from this leader. The job the leader has asked him to do is important to the future of the work group. The employee is excited about the new assignment but doesn't know where to begin because of his lack of experience with this task. THIS LEADER WOULD . . .

   a. Discuss the job with him, supporting his ability to do it.
   b. Define the activities necessary to successfully complete the job and supervise his work closely.
   c. Let him determine how to do the job.
   d. Specify what he is do do, but solicit any ideas he may have.

8. A subordinate is feeling somewhat insecure about a job assigned to him. He is highly competent and this leader knows that he has the skills to successfully and efficiently complete the assignment. THIS LEADER WOULD . . .

   a. Listen to his concerns and express confidence in his ability to complete the assignment.
   b. Structure the assignment so that it is clear but consider any helpful suggestions he may have.
   c. Tell him exactly what to do to get the job done and check his work daily.
   d. Let him figure out how to do the assignment on his own.

9. Group members have asked this leader to consider a change in their work schedule. In the past this leader has encouraged and supported their suggestions. In this case, group members are well aware of the need for change and are ready to suggest and try an alternate schedule. They are very competent and work well together as a group. THIS LEADER WOULD . . .

   a. Allow staff involvement in developing the new schedule and support the suggestions of group members.
   b. Design and implement the new schedule, but incorporate staff recommendations.
   c. Allow the staff to formulate and implement the new schedule on its own.
   d. Design the new schedule and closely direct its implementation.

10. This leader has arrived 30 minutes late for a meeting with his/her staff. When the leader arrives the meeting still hasn't started. Investigation reveals that a couple of group members tried to start the meeting but most group members are discouraged because of lack of group member cooperation. Up until now the leader believes the group had been making good progress. THIS LEADER WOULD . . .

    a. Restate the purpose of the meeting, then let the group function without any direction unless the group asks for the leader's help.
    b. Take control immediately and direct the group toward project completion.
    c. Direct the group's interaction toward task completion and encourage group members to discuss their problems and feelings.
    d. Ask the group to discuss the assigned task and provide as much support and encouragement as possible.

11. A member of the department has had a fine record of accomplishment with support and encouragement but little direction from this leader. The department member has been given similar tasks to accomplish for the coming year and this leader must decide how to supervise him. THIS LEADER WOULD . . .

    a. Let the subordinate function by himself providing his own support and direction.
    b. Emphasize to him the importance of meeting deadlines and direct his efforts at accomplishing assigned tasks.
    c. Talk with him and set goals and objectives for his task accomplishment, but consider his suggestions.
    d. Involve the subordinate in setting goals and support his efforts.

12. In the past this leader has worked closely with the staff directing and supporting their efforts. Productivity was high and people got along well together. Recognizing their abilities, this leader felt they could work well with only encouragement. The leader has redirected energies to new areas and the staff has continued to produce good results. The leader must now ask them to accept additional work. THIS LEADER WOULD . . . .

    a. Assign the work to them, make sure they know exactly what to do, and supervise them closely.
    b. Give them the job. Tell them that past performance has been good and that they will do well with this assignment.
    c. Make sure they know what is expected of them, but incorporate any helpful suggestions they may have.
    d. Let them determine how to complete the assignment.

13. A new employee has been hired to perform an important job in the office. Even though the employee is inexperienced, he is enthusiastic and feels he has the confidence to do the job. THIS LEADER WOULD . . .

    a. Let the subordinate determine what the job entails and how to do it.
    b. Tell the subordinate exactly what the job entails, what is expected of him, and monitor his work closely and frequently.
    c. Let the subordinate know what exactly has to be done, but see if he has any suggestions or ideas.
    d. Encourage and praise the subordinate's enthusiasm and ask him how he would tackle the job.

14. Top management has asked that the division increase its production by 10%. The division leader knows that this can be done, but it will require his/her active involvement. In order to become more actively involved, the leader must reassign the development of a new cost control system to an assistant manager. The assistant manager has had considerable experience with cost control systems but is a little unsure about doing the task on her own. THIS LEADER WOULD . . .

a. Ask her to take on the project. Encourage and support her efforts.

b. Discuss the project with her. Explain how the job should be done, but see if she has any ideas.

c. Assign her the project and let her determine how to do it.

d. Assign her the project and prepare a detailed memo explaining all the steps necessary to get the project done.

15. A subordinate has made a suggestion for change in the operations of the unit that makes sense to this leader. In the past, she has been able to offer and implement other helpful suggestions in a productive manner with the leader's support. The leader has confidence in her abilities. THIS LEADER WOULD . . .

a. Take charge of the suggestion and direct her in its implementation.

b. Discuss the suggestion with her and support her efforts to direct its implementation.

c. Organize the implementation but include her ideas.

d. Give her the responsibility for implementing the suggestion without any leader involvement.

16. Due to illness in the family, this leader has been forced to miss the first two meetings of a committee under his/her direction. Upon attending the third meeting, the leader found the committee functioning well and making good progress toward completion of its goals. This leader is unsure about how to fit into the group and what role should be assumed. THIS LEADER WOULD . . .

a. Attend, but let the group continue to work as it has during the first two meetings.

b. Assume the leadership of the committee and begin to direct its activities.

c. Do what can be done to make the committee feel important and involved and support their past efforts.

d. Direct the activities of the group, but incorporate group members' suggestions.

17. The staff is very competent and able to work well on their own. This leader has generally left them alone and delegated key responsibilities to individual members. Their performance has been outstanding. THIS LEADER WOULD . . .

a. Provide continual support and encouragement to group members.

b. Direct and closely supervise the activities of the staff.

c. Continue to let the group work on its own.

d. Direct their efforts, but work closely with the staff to solicit their suggestions.

18. Top level management has decided that a new procedure has to be installed in the department if long-term gains in performance are to be obtained. In the past, when new procedures were installed, the group has been eager to use them but has initially lacked the skills to do so. THIS LEADER WOULD . . .

a. Direct the initial implementation of the new procedure, but involve the group in discussing alternatives.

b. Closely direct the group in their initial use of the new procedure.

c. Get the group involved in a discussion of the procedure and encourage their cooperation and involvement.

d. Allow the group to formulate and implement the new procedure on its own.

19. This leader has been recently appointed the head of a division. Under the division's former boss, the staff functioned adequately with considerable support and encouragement. Since this leader has taken over, however, the staff appears to be more concerned with social activities than with carrying out their responsibilities. The staff's performance to date has been poor. THIS LEADER WOULD . . .

a. Discuss the staff's low performance with them and support their efforts to specify corrective action.

b. Direct and organize the necessary corrective action, but solicit input and suggestions from the group.

c. Point out the problem and allow staff members to define their own responsibilities and tasks.

d. Define roles, responsibilities and outcomes and freqeuntly check to see if their performance is improving.

20. One of the employees managed by this leader is reluctant to take on a new assignment. The employee has had little experience in the area the manager wants her to work. She has done a good job with the other tasks the manager has given her. THIS LEADER WOULD . . .

a. Explain to the employee what must be done and how to do it, but listen to why she is reluctant to do the task.

b. Give the employee the new assignment and let her determine the best way to do it.

c. Encourage the employee to try the new job and facilitate her efforts through mutual problem-solving.

d. Tell her exactly what must be done to successfully complete the assignment and frequently monitor the results.

APPENDIX D

LBA II

Leader Behavior Analysis II

Developed by Kenneth H. Blanchard, Ronald K. Hambleton, Douglas Forsyth and Drea Zigarmi

Scoring Directions

Blanchard Training and Development, Inc.

A Human Resource Development Company

125 State Place, Escondido, CA 92025
(619) 489-5005

2nd Printing

A B C D E F G
145

(FORM A)

LBA II Leader Behavior Analysis II

Directions:

1. Record your answers from the Leader Behavior Analysis II Form to the columns labeled S1-S4 under Style Flexibility. For each situation (1-20), circle the letter which corresponds to your answer.
2. Once this step is completed, repeat the procedure in the columns labeled P-E under Style Effectiveness.
3. Sum the number of circled letters in each of the eight columns on the scoring sheet and enter the sums in the boxes labeled Totals.

STYLE FLEXIBILITY

1. The column headings under Style Flexibility correspond to the four leadership styles.
   - S1 = high directive, low supportive behavior
   - S2 = high directive, high supportive behavior
   - S3 = high supportive, low directive behavior
   - S4 = low supportive, low directive behavior

   The column (S1, S2, S3, S4) with the largest number of circled letters is your *primary* leadership style. Enter this number from the total box in the appropriate quadrant on the Primary Style Matrix. For example, If the column with the largest number of circled items was column S3 with 8 items, your primary style is S3 or high supportive, low directive behavior. Enter the number 8 in the S3 circle on the Primary Style Matrix. If you have a tie for your primary style, two or more columns with the same number of items circled, enter the numbers from each of these styles in the appropriate quadrants.
2. Any column with four or more circled letters, besides your primary style(s) should be considered a secondary leadership style. Enter this number(s) in the appropriate triangle(s) in the Secondary Style Matrix.
3. Any column with less than four circled letters should be considered a style that you may want to develop. Enter this number(s) in the appropriate box(es) in the Developing Style Matrix.

STYLE FLEXIBILITY SCORE

1. To obtain your style flexibiity score, calculate the difference betwen 5 and the individual total entered in columns S1, S2, S3, S4 and enter these numbers in the boxes below. Do not be concerned with negative numbers. For example, if the total in Column S2 is 2, then the difference between 5 and 2 would be 3 and a 3 entered in the box below. If the total was 0, then the difference between 5 and 0 would be 5, and a 5 entered in the box below.
2. Add all four numbers in the boxes and enter this in the box designated subtotal. Subtract that sum from 30 and enter this in the box designated Style Flexibility Score. Scores can range from 0-30. Place an arrow ↖ at the corresponding number along the graph designated Style Flexibility. A score closer to zero indicates poor style flexibility. A low score is obtained when you select the same one or two styles for each situation. A score closer to 30 indicates good style flexibility. A high score is obtained when you use each of the four styles a number of times.

STYLE EFFECTIVENESS

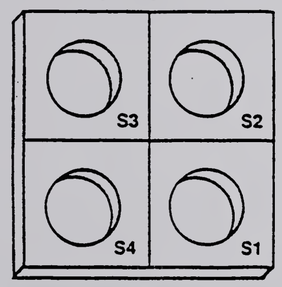
In order to score high on "style effectiveness" you must not only show a high level of flexibility in style selection, but you must also choose the leadership style which is most appropriate for each situation. The totals at the bottom of the "style effectiveness" columns indicate how often your leadership style selection was Poor (P), Fair (F), Good (G), and Excellent (E).

	STYLE FLEXIBILITY			
	S1	S2	S3	S4
1	A	C	D	B
2	A	C	B	D
3	A	B	C	D
4	C	B	D	A
5	D	A	C	B
6	A	C	D	B
7	B	D	A	C
8	C	B	A	D
9	D	B	A	C
10	B	C	D	A
11	B	C	D	A
12	A	C	B	D
13	B	C	D	A
14	D	B	A	C
15	A	C	B	D
16	B	D	C	A
17	B	D	A	C
18	B	A	C	D
19	D	B	A	C
20	D	A	C	B
TOTALS				
	DIFFERENCE BETWEEN			
	5	5	5	5

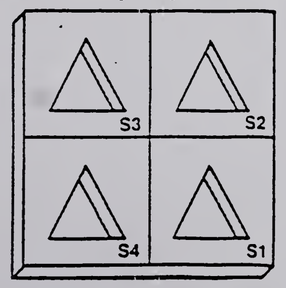
SUBTOTAL ☐ + ☐ + ☐ + ☐ = ☐

Subtract "Subtotal" from 30 to get your Style Flexibility Score = ☐

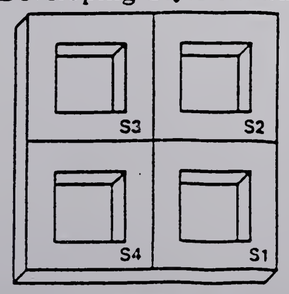
Primary Style Matrix



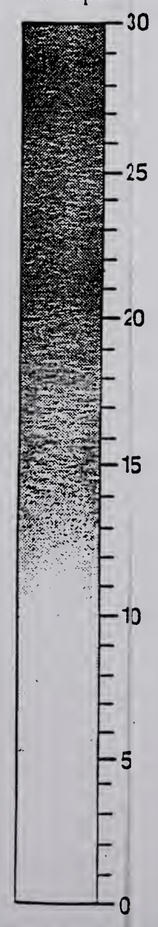
Secondary Style Matrix



Developing Style Matrix



Style Flexibility Graph

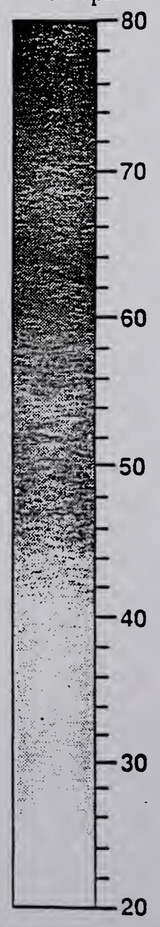


	STYLE EFFECTIVENESS			
	P	F	G	E
1	B4	D3	A	C
2	D4	B3	C	A
3	D4	C3	A	B
4	A4	D3	B	C
5	D1	B4	A	C
6	A1	C2	B	D
7	C4	A3	D	B
8	C1	B2	D	A
9	D1	B2	A	C
10	A4	B1	D	C
11	B1	C2	D	A
12	A1	C2	D	B
13	A4	D3	C	B
14	D1	B2	C	A
15	A1	C2	B	D
16	B1	D2	C	A
17	B1	D2	A	C
18	D4	C3	A	B
19	C4	A3	D	B
20	B4	C3	D	A
TOTALS				
	MULTIPLIED BY			
	1	2	3	4

☐ + ☐ + ☐ + ☐ = ☐

Style Effectiveness Score ↑

Style Effectiveness Graph



STYLE EFFECTIVENESS SCORE

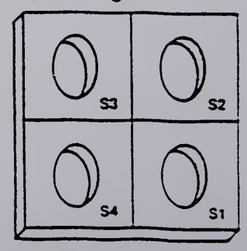
1. To obtain your style effectiveness score multiply the total entered in the P, F, G, E columns, by the number below each total. Enter the products in the boxes provided. Add all four numbers and enter this in the box entitled "Style Effectiveness Score". Scores can range from 20-80. A score closer to 20 indicates low style effectiveness. A low score is obtained when you choose a number of fair or poor leader style choices for the 20 situations. A score closer to 80 suggests high style effectiveness. A high score is obtained when you choose mostly good and excellent leader style choices.
2. Place an arrow ↖ at the corresponding number along the graph designated style effectiveness.

STYLE DIAGNOSIS

To completely understand how you might improve your effectiveness score it is helpful to examine the appropriateness of your style selections. The number in the right hand corners of the choices in the poor and fair style effectiveness columns indicate the leadership style for the choices made. Record the number of Style 1 choices made in the poor and fair columns and place that number in the appropriate quadrant in the Style Diagnosis Matrix. Repeat this procedure for Style 2, 3, and 4 choices within the poor and fair columns.

A repeated pattern of three or more answers in the Fair and Poor categories in one leadership style means you may be not taking into consideration the development level of the person or group with whom you are working. Go back to your LBA II form and reanalyze the situations to see if you can better understand why you are theoretically using those styles inappropriately.

Style Diagnosis Matrix



APPENDIX E

Carnizaro/Self Evaluation Instrument-Supervisor

Table of Contents

Canizaro/Self-Evaluation Instrument

INTRODUCTION

Although there are many tasks you perform in your job this instrument is concerned only with instructional supervision which is the work you do directly with teachers to improve instruction. This instrument focuses on the knowledge, attitudes and skills necessary for effective instructional supervision as identified in the current literature.

Supervision is a complex process and frequently there is little opportunity for instructional supervisors to learn how to improve. Through this Self-Evaluation Instrument supervisors can take time to think about their performance and design ways to develop skills, acquire information and broaden understandings. First, by completing the Self-Evaluation Instrument the supervisor focuses on the behaviors, attitudes and skills he or she needs to be effective. Second, the instructional supervisor develops a plan for improvement. The plan can be used as a means of documenting growth and measuring success because it identifies specific steps to be taken to improve.

The purpose of the self-evaluation is to aid you in your job as an instructional supervisor and assist you in your professional growth. It is not a rating instrument. Self-evaluation is a necessary part of being an effective instructional supervisor and a professional. Professionals as a part of the nature of their work routinely analyze their performance, assess its effectiveness and grow and change to become even more effective. The value in this self-evaluation is the thought you give to your performance and specific new behaviors you select to practice and make a part of your repertoire.

References are given for each of the supervisory elements to assist the supervisor in finding information to learn about a particular element. By no means are they intended to be all inclusive; other sources you identify can be valuable and should be used. These suggested references will assist you in finding the resources you need and frequently include bibliographies and reference list for further study. Any sources you identify that are beneficial can be added to this resource list for future reference.

DIRECTIONS

Read the entire packet before beginning so you will be thoroughly familiar with the materials and can use it to your best advantage. Complete the Self-Evaluation instrument on the practice pages to evaluate your performance as an instructional supervisor. If any item is unclear you will find an explanation in the Description of the Elements section under the number corresponding to the item on the Self-Evaluation Instrument. Read the description of any element you do not understand in the Description of the Elements of Instructional Supervision and Resources for improving Performance section of this packet on pages 8 - 24.

The Self-Evaluation Instrument will be most effective if you neither underestimate nor overestimate your abilities. Describe your behavior as it <u>is</u> and not how you would like it to be. Your answers should reflect the way you feel, act, or think <u>now</u> and not how you would like to think, act or feel in the future. This self-evaluation also is <u>not</u> an indication of how you think you <u>should</u> think, act, or feel. The more accurate the self-evaluation, the more value it has for you.

After completing the Self-Evaluation Instrument on pages 3 and 4 use the Steps to Analyze Your Supervision on page 5 and the Analysis Sheet on page 6 to identify the elements on which you will work.

All responses are completely confidential and the instrument will not be identified by name or by school. Responses will be identified by the code number located in the upper right hand corner of the Self-Evaluation Instrument.

Code_____

SELF-EVALUATION INSTRUMENT

Use this form to evaluate your performance as an instructional supervisor. Indicate your response to each item by recording the appropriate letters on the line to the left of each item.

VW	I do this very well.
FW	I do this fairly well.
NI	This is not important to me.
B	I could do this better.
MB	I could do this much better.

_____ 1. I collect a variety of data using different methods during classroom observations.

_____ 2. I can analyze the data I collect during classroom observations.

_____ 3. I am a skillful observer and know the behavior and events to note.

_____ 4. I can identify behavior that discriminates against boys or girls, blacks, whites, or other racial and ethnic groups.

_____ 5. I am prepared for conferences with teachers and I effectively use conferencing skills.

_____ 6. The teachers and I can devise new strategies together and I can suggest resources to help them.

_____ 7. I ask teachers and they give me feedback on my conferencing skills.

_____ 8. My evaluation of teachers promotes their professional growth.

_____ 9. The feedback I give teachers is meaningful and appropriate.

_____10. I work with teachers to develop objectives for instruction.

_____11. I analyze lesson plans for effective learning activities.

_____12. I evaluate classroom instruction and work with teachers to effectively evaluate students.

_____13. I communicate effectively with the teachers in our school.

PLEASE SEE REVERSE SIDE

Code_____

_____14. I use listening skills in my work with teachers.

_____15. I can identify and understand non-verbal communication in the school setting.

_____16. When conflicts arise the staff and I can facilitate their resolution.

_____17. The leadership I provide is strong and effective.

_____18. I respond to teachers in ways that are consistent with their individual needs and personalities.

_____19. The staff and I have been able to make changes (improvements) in our school with a minimum of difficulty.

_____20. When the teachers and I work together in a group our work is productive.

_____21. I provide the setting for individuals' or teachers' needs to be integrated with those of the school.

_____22. The goals the staff and I have developed for our school are clear to the staff, students and community.

_____23. I develop an open climate by facilitating teachers' work, setting high expectations, being sensitive to feedback from the staff and treating teachers in a personal way.

_____24. I contribute to the development of high staff morale and strongly motivated teachers.

_____25. I provide the circumstances for teachers in our school to continually become more able to independently analyze their teaching and develop new teaching strategies.

_____26. With the teachers I have developed an effective staff development program in our school.

STEPS TO ANALYZE YOUR SUPERVISION

1. On the Self-Evaluation Instrument place a check mark next to any item you marked B or MB; these are the areas in which you think you need improvement.

2. Write the number of each of the questions you have checked on the Analysis Sheet in the first column.

3. If there are any other items you would like to work on, write the numbers of these items in the first column on the Analysis Sheet.

4. The Outline of Elements of the Supervisory Process names each of the items on the Self-Evaluation form. Write the name of the supervisory element next to the corresponding number on the Analysis Sheet.

5. Read the description of each of the elements that you have written on your Analysis Sheet and the list of suggested resources for that element in the Description of the Elements of Instructional Supervision and Resources for Improving Performance section that begins on page 8.

6. Record the resources you will use on the Analysis Sheet. Specify what steps you intend to take to improve your supervisory performance.

ANALYSIS SHEET

Item Number	Supervisory Element	Plan for Improving Supervision
5	Conferencing skills	1. Read Chapter 14 in Cogan and ERIC Document 136 477 by Acevedo. 2. Outline the skills necessary for a successful conference. 3. Plan a conference with a teacher focusing on one or two specific skills. 4. After the conference list the skills you used well and those that need more practice. Do this after several conferences. 5. If necessary do more reading on the specific skills you are working to improve. 6. Design a checklist to be used to evaluate your conferences with teachers and document your growth.

OUTLINE OF THE ELEMENTS OF INSTRUCTIONAL SUPERVISION

OBSERVATION AND ANALYSIS OF TEACHING
1. Collection of data
2. Analysis of data
3. Observation of teaching
4. Sex and race bias

CONFERENCING WITH TEACHERS
5. Conferencing skills
6. Identifying strategies for the improvement of teaching
7. Teacher's evaluation of the conference
8. Process of evaluation
9. Feedback skills

CURRICULUM IMPLEMENTATION: INSTRUCTION
10. Instructional objectives
11. Instructional implementation
12. Instructional evaluation

COMMUNICATION
13. Definition and scope of communication
14. Listening skills
15. Non-verbal communication
16. Conflict resolution

LEADERSHIP
17. Leadership behavior
18. Supervisory orientation
19. Process of change
20. Effective group skills
21. The school as an organization
22. Setting goals
23. Climate of the school

HUMAN RESOURCES
24. Human potential
25. Teacher autonomy
26. Staff development

DESCRIPTION OF THE ELEMENTS OF INSTRUCTIONAL SUPERVISION

AND

RESOURCES FOR IMPROVING PERFORMANCE

OBSERVATION AND ANALYSIS OF TEACHING

1. Collection of data.

The classroom is a complex setting with many interactions going on at one time. It is essential to understand the variety of ways to collect data as well as the situations in which they are most effective. A picture of the classroom emerges from this collection of information. Accurate and sufficient data provide information for the dialogue between teacher and supervisor to improve teaching.

Borich, Gary D. and Madden, Susan K. Evaluating Classroom Instruction: A Sourcebook of Instruments. Reading, MA: Addison-Wesley, 1977, Section I C, pp. 149-176 and Section III C, pp. 437-485.

Cogan, Morris L. Clinical Supervision. Boston: Houghton Mifflin, 1973, Chapters 11 and 12.

Griffith, Frances. A Handbook for the Observation of Teaching and Learning. Midland, MI: Pendell Publishing, 1973, Chapter IV.

Grimmet, Peter P. "Supervision in the 80's: Guidelines for Observing Teaching." Education Canada 20(Fall 1980): 28-31.

Harris, Ben M. Supervisory Behavior in Education (2nd ed.). Englewood Cliffs, N.J.: Prentice-Hall, 1975, Chapter 7.

Jones, Keith and Sherman, Ann. "Two Approaches to Evaluation." Educational Leadership 37(April 1980): 553-557.

2. Analysis of data.

Data are used to analyze the events in the classroom; patterns in teaching can be identified and critical incidents indicated. The data from the classroom become meaningful through the analysis. The supervisor and teacher describe those elements in the teaching

behavior that are strengths and those that can be improved. Through the examination of the data the teacher and supervisor analyze teaching behavior, identify specific areas on which to focus, and devise ways to improve.

Cogan, Morris L. Clinical Supervision. Boston: Houghton Mifflin, 1973, Chapters 11 and 12.

Goldhammer, Robert. Clinical Supervision: Special Methods for the Supervision of Teachers. New York: Holt, Rinehart and Winston, 1969, Chapters 4 and 5.

Hunter, Madeline. "Teaching Is Decision Making." Educational Leadership 37(Oct. 1979): 62-67.

Peterson, Penelope L., and Walberg, Herbert J. Teachers' Decision Making. Berkley, CA: McCutchan Publishing, 1979, Chapter 7.

3. Observation of teaching.

The complex classroom setting has many behaviors, activities, and components to be observed. Persons can select vastly different details from the same setting. Skills in observation can be developed through understanding and practice. The instructional supervisor learns to separate the important from the non-important and to clearly identify the frame of reference one brings to the classroom observation. Knowing what is essential and paying careful attention to it will provide the instructional supervisor with valuable data for the conference with the teacher. Carefully selected data are important because they are the basis for decisions on the improvement of teaching.

Acevedo, Mary A. et al. A Guide for Conducting an Effective Feedback Session. Austin, Texas: University of Texas, 1976. (ERIC Document Reproduction Service No. 136 477).

Anderson, Robert H. "Improving Your Supervisory Skills." National Elementary School Principal 58(June 1979): 42-45.

Beegle, Charles W. and Brandt, Richard M.(eds.). Observational Methods in the Classroom. Alexandria, VA: ASCD, 1973. (ERIC Document Reproduction Service No. 077 146).

Brandt, Ron. "On Improving Teacher Effectiveness: A Conversation with David Berliner." Educational Leadership 40(Oct. 1982): 12-15.

Cogan, Morris L. Clinical Supervision. Boston: Houghton Mifflin, 1973, Chapters 11 and 12.

Eisner, Elliot. "An Artistic Approach to Supervision." Supervision of Teaching. 1982 Yearbook. Alexandria, VA: ASCD, 1982, Chapter 4.

Goldhammer, Robert. Clinical Supervision: Special Methods for the Supervision of Teachers. New York: Holt, Rinehart and Winston, 1969, Chapter 3 and pp. 57-72.

Good, Thomas L. and Brophy, Jere E. Looking in Classrooms(2nd ed.). New York: Harper and Row, 1978, Chapters 3 and 4.

Harris, Ben M. Supervisory Behavior in Education(2nd ed.). Englewood Cliffs, N.J.: Prentice-Hall, 1975, Chapter 7.

4. Sex and race bias.

An individual's perception(accurate or distorted) of a situation influences his or her behavior. Professionals must examine their attitudes toward others - males, females, blacks, whites, ethnic groups. Stereotypes that are common in our society can influence our thinking, our attitudes and our behavior without a conscious confirmation on our part. As professionals analysis of our perceptions is essential.

Banks, James. Multiethnic Education: Practices and Promises, PDK Fastback #87. Bloomington, IN: Phi Delta Kappa Educational Foundation, 1977.

Bash, James H. Effective Teaching in the Desegregated School, PDK Fastback #32. Bloomington, IN: Phi Delta Kappa Educational Foundation, 1973.

Bornstein, Rita. "The Education of Women: Protection or Liberation?" Educational Leadership 36(February 1979): 331-337.

Fauth, Gloria C. and Jacobs, Judith E. "Equity in Mathematics Education: The Educational Leader's Role." Educational Leadership 37(March 1980): 485-490.

Gough, Pauline. Sexism: New Issue in American Education. PDK Fastback #81. Bloomington, IN: Phi Delta Kappa Educational Foundation, 1976.

Hall, Roberta M. and Sandler, Bernice R. The Classroom Climate: A Chilly One for Women? Washington, D.C.: Project on the Status and Education of Women, Feb. 1982.(ERIC Document Reproduction Service No. 215 628).

Johnson, Carole Schulte and Greenbaum, Gloria R. "Are Boys Disabled Readers Due to Sex-Role Stereotyping?" Educational Leadership 37(March 1980): 492-496.

Morris, Jeanne B. "Indirect Influences on Children's Racial Attitudes." Educational Leadership 38(January 1981): 286-287.

Sadker, Myra Pollack and Sadker, David Miller. Sex Equity Handbook for Schools. New York: Longman, 19 West 44th Street, 1982, Chapters 4 and 5.

Slavin, Robert E. "Integrating the Desegregated Classroom: Actions Speak Louder than Words." Educational Leadership 36(Feb. 1979): 322-324.

CONFERENCING WITH TEACHERS

5. Conferencing skills.

Conferences with teachers are a vital part of the supervisory process. Consideration is given to what has occurred prior to the conference and what will occur after the conference in the teacher's development and in the supervisor-teacher relationship. Outcomes of the conference affect the teacher and supervisor and influence the entire school environment.

The skill level of the supervisor can make the difference between an effective conference and one that is not. Interaction between supervisor and teacher provides insight into the complexities of teaching and can lead to the improvement of the teacher's work in the classroom.

Acevedo, Mary A. et al. A Guide for Conducting an Effective Feedback Session. Austin, Texas: University of Texas, 1976. (ERIC Document Reproduction Service No. ED 136 477).

Cogan, Morris L. Clinical Supervision. Boston: Houghton Mifflin, 1973, Chapter 14.

Goldhammer, Robert. Clinical Supervision: Special Methods for the Supervision of Teachers. New York: Holt, Rinehart and Winston, 1969, Chapter 6.

Hunter, Madeline. "Six Types of Supervisory Conferences." Educational Leadership 37(February 1980): 408-412.

Kindsvatter, Richard and William W. Wilen. "A Systematic Approach to Improving Conference Skills." Educational Leadership 38(April 1981): 525-529.

Kyte, George C. "The Supervisor-Teacher Conference: A Case Study." Education 92(Nov. 1971): 17-25.

Shrigley, Robert L. and Walker, Ronald A. "Positive Verbal Response Patterns: A Model for Successful Supervisor-Teacher Conferences." School Science and Mathematics 81(7): 560-562.

Squires, David A., Huitt, William G. and Segars, John K. Effective Schools and Classrooms: A Research-Based Perspective. Alexandria, VA: ASCD, 1983, Chapter 5.

6. Identifying strategies for the improvement of teaching.

In the conference the supervisor and teacher together examine the current teaching behavior and explore possible alternatives and ways to improve. Just as we can sharpen our skills in playing tennis by analyzing our game, teaching can be improved by analyzing teaching behavior and devising new strategies to improve it. The instructional supervisor frequently suggests new strategies and resources which the teacher uses to further develop as a professional

Brandt, Ron. "On Improving Teacher Effectiveness: A Conversation with David Berliner." Educational Leadership 40(October 1982): 12-15.

Brophy, Jere E. "Teacher Behavior and Student Learning." Educational Leadership 37(October 1979): 33-38.

Eisner, Elliot W. "The Art and Craft of Teaching." Educational Leadership 40(January 1983): 4-13.

Kartis, Alexia M. and Watters, Annette Jones. Library Research Strategies for Educators. PDK Fastback #192. Bloomington, IN: Phi Delta Kappa Educational Foundation, 1983.

Levin, Tamar and Long, Ruth. Effective Instruction. Alexandria, VA: ASCD, 1981, pp. 64-100.

Rubin, Louis. "Artistry in Teaching." Educational Leadership 40(January 1983): 44-49.

Squires, David A., Huitt, William G. and Seagars, John K. "Improving Classrooms and Schools: What's Important." Educational Leadership 39(December 1981): 174-179.

Wiles, Jon and Bondi, Joseph. Supervision: A Guide to Practice. Columbus, Ohio: Charles E. Merrill, 1980, pp. 318-333, "Resources for Supervisors".

7. Teacher's evaluation of the conference.

For the supervisor and teacher to grow and become more adept at conferencing it is necessary for both to review and assess the conference. This serves a dual goal: to provide feedback for the supervisor and to give the teacher an opportunity to act as a colleague and discuss the work together with the supervisor. In the supervisory process both the teacher and the supervisor develop professionally. The teacher's evaluation of the conference is one of the ways to encourage growth of supervisor and supervisee.

Acevedo, Mary A. et al. A Guide for Conducting an Effective Feedback Session. Austin, Texas: University of Texas, 1976. (ERIC Document Reproduction Service No. ED 136 477).

Cogan, Morris L. Clinical Supervision. Boston: Houghton Mifflin, 1973, pp.216-219 and Chapter 14.

Kindsvatter, Richard and William W. Wilen. "A Systematic Approach to Improving Conference Skills." Educational Leadership 38(April 1981): 525-529.

Kyte, George C. "The Supervisor-Teacher Conference: A Case Study." Education 92(Nov. 1971): 17-25.

Shrigley, Robert L. and Walker, Ronald A. "Positive Verbal Response Patterns: A Model for Successful Supervisor-Teacher Conferences." School Science and Mathematics 81(7): 560-562.

Squires, David A., Huitt, William G. and Segars, John K. Effective Schools and Classrooms: A Research-Based Perspective. Alexandria, VA: ASCD, 1983, Chapter 5.

8. Process of evaluation.

Evaluation is not something one does to a teacher, but it is a means to improve teaching. Evaluation is a process. We plan; we do; we

assess or evaluate and then begin again improving each time. Identifying existing strengths in the teacher is a crucial, but sometimes overlooked part of this process. Knowing one's strengths is important because these strengths can be further refined. The teacher spends time developing competencies rather than shoring up lesser skills. The goal is to continue to become better at what we are doing. Understanding evaluation in this way enables the supervisor to develop a positive approach and give teachers the opportunities to improve their work.

Combs, Arthur W., Avila, Donald L. and Purkey, William W. Helping Relationships: Basic Concepts for the Helping Profession. Boston: Allyn and Bacon, 1971, Chapter 6.

Jones, Keith and Sherman, Ann. "Two Approaches to Evaluation." Educational Leadership 37(April 1980): 553-557.

Levin, Tamar and Long, Ruth. Effective Instruction. Alexandria, VA: ASCD, 1981, Chapter 4.

McGreal, Thomas L. "Effective Teacher Evaluation Systems." Educational Leadership 39(January 1982): 303-305.

McGreal, Thomas L. Successful Teacher Evaluation. Alexandria, VA: ASCD, 1983, pp. 2-36.

Ness, Mildred. "The Administrator as Instructional Supervisor." Educational Leadership 37(February 1980): 404-406.

Sergiovanni, Thomas J. and Starratt, Robert J. Supervision: Human Perspectives(2nd ed.). New York: McGraw-Hill, 1979, Chapters 14 and 16.

9. Feedback skills.

Skills in providing feedback are necessary for the instructional supervisor. For effective change in behavior there must be continuous opportunities to observe results and to know the consequences of our decisions. Communicating with teachers about their teaching behavior is at the heart of the supervisory process. The negative aspects of feedback such as judgement, fear, threat and defensiveness are minimized and the goal of evaluation - assessment in order to improve - is emphasized.

Acevedo, Mary A. et al. A Guide for Conducting an Effective Feedback Session Austin, Texas: University of Texas, 1976. (ERIC Document Reproduction Service No. ED 136 477).

Alfonso, Robert J., Firth, Gerald R. and Neville, Richard F. Instructional Supervision: A Behavior System. Boston: Allyn & Bacon, 1981, Chapter 6.

Filley, Alan C. Interpersonal Conflict Resolution. Glenview, Illinois: Scott Foresman, 1975, pp. 41-47.

McGreal, Thomas L. Successful Teacher Evaluation. Alexandria, VA: ASCD, 1983, pp. 116-124.

Walther, Fay and Taylor, Susan. "An Active Feedback Program Can Spark Performance", Personnel Administrator, June 1983, 28(6) pp.147-149.

CURRICULUM IMPLEMENTATION: INSTRUCTION

10. Instructional objectives.

Objectives are necessary to give us direction in whatever we are doing. A clear idea of expected outcomes enables us to plan intelligently and effectively. Teachers use objectives as a road map for classroom instruction. Through a critical review of objectives and the forces influencing them the teacher knows more clearly why she or he is making certain decisions. This review prevents going in directions that do not lead to accomplishment of identified goals. Specific, well understood objectives commit one to some expected outcomes, to a certain course of action. Without objectives we cannot decide if we have actually succeeded in what we set out to do. Also, establishing goals is a necessary step because there is so much that students can learn - much more than there is time to teach- and we define our priorities through our goals.

Brandt, Ronald S. and Tyler, Ralph W. "Goals and Objectives." Fundamental Curriculum Decisions. 1983 Yearbook. Fenwick W. English, (ed.). Alexandria, VA: ASCD, 1983.

Cogan, Morris L. Clinical Supervision. Boston: Houghton Mifflin, 1973, Chapter 9.

Eisner, Elliot W. The Educational Imagination. New York: Macmillan, 1979, Chapter 6.

Oliva, Peter F. Supervision for Today's Schools. New York: Harper and Row, 1976, Chapter 3.

Saylor, J. Galen, Alexander, William M. and Lewis, Arthur J. Curriculum Planning for Better Teaching and Learning(4th ed.). New York: Holt Rinehart and Winston, 1981, Chapter 6.

Saylor, J. Galen and Alexander, William M. Planning Curriculum for Schools. New York: Holt, Rinehart and Winston, 1974, Chapter 4.

11. Instructional implementation.

Learning activities are designed to teach students in the classroom. It is necessary to analyze learning activities to find out what it is they actually teach, why they were selected, how they were designed and the effect they have on learners. Making conscious decisions throughout the process of developing activities for the students helps insure that the learning we want to take place does. Certain instructional and learning processes have consistently helped students achieve at higher levels. Knowing these successful processes and the variables in classroom learning is essential for the instructional supervisor.

Cogan, Morris L. Clinical Supervision. Boston: Houghton Mifflin, 1973, Chapter X.

Eisner, Elliot W. The Educational Imagination. New York: Macmillan, 1979, Chapter 9.

Gow, Doris T. and Casey, Tommye W. "Selected Learning Activities." Fundamental Curriculum Decisions. Fenwick W. English(ed.). 1983 Yearbook. Alexandria, VA: ASCD, 1983.

Levin, Tamar and Long, Ruth. Effective Instruction. Alexandria, VA: ASCD, 1981, Chapters 1,3,5.

McGreal, Thomas L. Successful Teacher Evaluation. Alexandria, VA: ASCD, 1983, pp. 80-89.

Oliva, Peter F. Supervision for Today's Schools. New York: Harper and Row, 1976, Chapters 3,4,5.

Rosenshine, Barak. "Teaching Functions in Instructional Programs." Elementary School Journal 83(March 1983): 335-351.

Saylor, J. Galen and Alexander, William M. Planning Curriculum for Schools. New York: Holt, Rinehart and Winston, 1974, Chapter 6.

Sergiovanni, Thomas J. and Starratt, Robert J. Supervision: Human Perspectives(2nd ed.). New York: McGraw-Hill, 1979, Chapter 12.

Taba, Hilda. Curriculum Development: Theory and Practice. New York: Harcourt, Brace, Jovanovich, 1962, Chapter 20.

Zahorik, John A. "Teachers' Planning Models." Educational Leadership 33(November 1975): 134-139.

12. Instructional evaluation.

Evaluation is a far more complex process than simply assigning grades. Both strengths and "next steps" are described. Through the evaluation process we diagnose, that is, we assess strengths and weaknesses. With this information we improve our program, our lesson, our conference, our work. Tests are only one way to evaluate students. We can observe students completing specific work; discuss the process the student went through to reach a certain point; read the student's daily log or journal. The instructional supervisor is familiar with a variety of methods of evaluation and uses the information to re-plan and re-design.

Aldrich, Ruth Annel. "Innovative Evaluation of Education." Theory into Practice 13(February 1974): 1-4.

Eisner, Elliot W. The Educational Imagination. New York: Macmillan, 1979, Chapter 10.

Farley, Joseph M. "Student Interviews as an Evaluation Tool." Educational Leadership 39(December 1981): 185-186.

Levin, Tamar and Long, Ruth. Effective Instruction. Alexandria, VA: ASCD, 1981, Chapter 2.

Nowakowski, Jeri Ridings. "On Educational Evaluation: A Conversation with Ralph Tyler." Educational Leadership 40(May 1983): 24-29.

Oliva, Peter F. Supervision for Today's Schools. New York: Harper and Row, 1976, Chapter 5.

Simon, Sidney B. and Bellanca, James A. Degrading the Grading Myths: A Primer of Alternatives to Grades and Marks. Alexandria, VA: ASCD, 1976.

COMMUNICATION

13. Definition and scope of communication.

When we think of communicating we immediately think of speaking. However, verbal communication is only one aspect of this multifaceted subject.

A communication system exists in any institution; it is the means to transmit ideas, values, feelings and information. Communicating between human beings is a complex process. Our own experiences, unconscious connections and perceptions influence what we say and what we hear others say. Our feelings also play an important role in communicating to others. What is communicated is not what is intended, but what is comprehended.

For the instructional supervisor it is necessary to understand both the communication system of the school organization and the skills necessary for effective communication between individuals.

Alfonso, Robert J. and Firth, Gerald R. and Neville, Richard F. Instructional Supervision: A Behavior System. Boston: Allyn & Bacon, 1981, Chapter 6.

Beatty, P.J. "Dialogic Communication in the Supervision Process: A Humanistic Approach." Education 97(Spring 1977): 226-32.

Combs, Arthur W., Avila, Donald L. and Purkey, William W. Helping Relationships: Basic Concepts for the Helping Profession. Boston: Allyn and Bacon, 1971, Chapter 13.

Lovell, John T. and Wiles, Kimball. Supervision for Better Schools. Englewood Cliffs, N.J.: Prentice-Hall, 1983, Chapter 5.

Unruh, Adolph and Turner, Harold E. Supervision for Change and Innovation. Boston: Houghton Mifflin, 1970, Chapter 2.

14. Listening skills.

Good interpersonal relationships require that one be a good listener. Through skillful listenings the supervisor discovers the interests and needs of teachers. When a supervisor imposes his or her own agenda the teacher is not encouraged to share concerns, problems and successes. Active listening is an invaluable skill for a leader to understand and use. Knowing that teaching is a lonely job helps the supervisor meet the needs of teachers by listening. Effective listening on the part of the supervisor can promote the development of humane relationships and climate, as well as provide an opportunity

for growth for teachers.

Applebaum, Ronald L., Bodaken, Edward M., Sereno, K.K. and Anatol, K.W.E. The Process of Group Communication. Chicago, IL: Science Research Associates, 1974.

Gordon, Thomas. Leader Effectiveness Training. (no city given): Wyden Books, 1977, Chapters IV and V.

Loughary, John W. and Ribley, Theresa M. Helping Others Help Themselves: A Guide to Counselling Skills. New York: McGraw-Hill, 1979, Chapter 4.

15. Nonverbal communication.

Human beings do not communicate only through language. Facial expressions, gestures, actions, eye contact, stance and space send messages. "Actions speak louder than words" is an adage that confirms the importance of nonverbal communication. What is not said may be more meaningful than what is said. More than the spoken word is communicated when people talk to each other. Nonverbal interaction includes the visual dimension and the affective portions of the aural dimension such as inflection. Instructional supervisors can record nonverbal behaviors in their observations to provide more information for teachers and can be aware of messages others send through nonverbal communication.

Andersen, Peter and Andersen, Janis. "Nonverbal Immediacy in Instruction." Communication in the Classroom. Larry L. Barker(ed.). Englewood Cliffs, N.J.: Prentice-Hall, 1982, Chapter 6.

Cogan, Morris L. Clinical Supervision. Boston: Houghton Mifflin, 1973, pp. 142-145; 187-195.

Galloway, Charles. Silent Language in the Classroom. PDK Fastback #86. Bloomington, IN: Phi Delta Kappa Educational Foundation, 1976.

Heger, Herbert K. How to Analyze Verbal and Nonverbal Classroom Communication. Spokane, Washington: Whitworth College, 1976. (ERIC Document Reproduction Service No. ED 183 616).

Miller, Patrick W. "Silent Messages." Childhood Education 58(Sept./Oct. 1981): 20-24.

16. Conflict resolution.

In settings where human beings are working together it is inevitable that conflicts will arise. A leader resolves them in a way that promotes growth rather than one that develops more deeply imbedded problems. Without conflict there would be no innovations or challenging of existing norms. "Problems are opportunities in work clothes" describes succinctly the positive nature of conflicts.

It is well to note that the goal of resolving conflicts is not necessarily agreement. An environment for personal and professional growth not only accepts but welcomes diversity of opinion and differing ideas. Acceptance does not mean the same as agreement. An accepting atmosphere reduces the feelings of threat and makes possible more open approaches to examining self and the world, but does not demand that everyone agree.

Combs, Arthur W., Avila Donald L. and Purkey, William L. Helping Relationships: Basic Concepts for the Helping Professions. Boston: Allyn and Bacon, 1971, Chapters 8, 9, 10.

Filley, Alan C. Interpersonal Conflict Resolution. Glenview, Illinois: Scott Foresman, 1975, Chapter 2.

Gordon, Thomas. Leader Effectiveness Training. (no city given): Wyden Books, 1977, Chapters VIII and IX.

Patton, Bobby R. and Griffin, Kim. Decision-Making Group Interaction. New York: Harper & Row, 1978, Chapter 7.

Pfeiffer, William J. and Jones, John E. The 1974 Handbook for Group Facilitators. La Jolla, CA: University Associates, 1974, pp. 139-141.

Sergiovanni, Thomas J. and Starratt, Robert J. Supervision: Human Perspectives(2nd ed.). New York: McGraw-Hill, 1979, Chapter 7.

Weider-Hatfield, Deborah "A Unit in Conflict Management Communication Skills." Communication Education 30(July, 1981): 265-273.

LEADERSHIP

17. Leadership behavior.

The supervisor is the instructional leader who provides focus and direction. Leadership uses neither indoctrination nor coercion, but

raises the levels of motivation reciprocally. Effective leadership is a powerful tool for developing an environment where students, teachers and supervisor grow and learn.

Educational Leadership 36 (March, 1979): Leadership Theme Issue.

Lovell, John T. and Wiles, Kimball. Supervision for Better Schools (5th ed.). Englewood Cliffs, N.J.: Prentice-Hall, 1983, Chapter 4.

Petrie, Thomas A. and Burton, Barry "Levels of Leader Development." Educational Leadership 37(May 1980): 628-631.

Sergiovanni, Thomas J. and Starratt, Robert J. Supervision: Human Perspectives(2nd ed.). New York: McGraw-Hill, 1979, Chapter 5.

18. Supervisory orientation.

It is important for supervisors to respond to individual differences among their teaching staff. All human beings have unique combinations of experiences, information and feelings and thus respond to individuals and situations in different ways. Supervisors who are sensitive to such differences utilize a variety of approaches with their supervisees.

Glickman, Carl D. "The Developmental Approach to Supervision." Educational Leadership 38 (November 1980): 178-180.

Glickman, Carl D. Developmental Supervision: Alternative Practices for Helping Teachers improve Instruction. Alexandria, VA: ASCD, 1981, Chapters 3, 4 and 5.

Sergiovanni, Thomas J. and Starratt, Robert J. Supervision: Human Perspectives(2nd ed.). New York: McGraw-Hill, 1979, Chapter 6.

19. Process of change.

In the past change has largely been accomplished based on a seat-of-the-pants approach. Using the experience of practicing change agents the supervisor can plan change and ease a difficult process. The leader both maintains the organization the way it is and improves or changes it. Understanding the process of change, how it takes place and the attitudes, values and behaviors that act as barriers and facilitators enables the instructional supervisor to plan improvements in the school setting.

Alfonso, Robert J. and Firth, Gerald R. and Neville, Richard F. Instructional Supervision: A Behavior System. Boston: Allyn & Bacon, 1981, Chapter 8.

Carmichael, Lucianne. "Leaders as Learners." Educational Leadership 40(October 1982): 58-59.

Educational Leadership 41(November 1983): Theme Issue on School Improvement.

Havelock, Ronald G. The Change Agent's Guide to Innovation in Education. Englewood Cliffs, N.J.: Educational Technology Publications, 1973.

Hersey, P., and Blanchard, K. Management of Organizational Behavior Englewood Cliffs, N.J.: Prentice-Hall, 1977, Chapter 10.

Lovell, John T. and Wiles, Kimball. Supervision for Better Schools (5th ed.). Englewood Cliffs, N.J.: Prentice-Hall, 1983, Chapter 6.

Sarason, Seymour B. The Culture of the School and the Problem of Change. Boston: Allyn and Bacon, 1971, Chapter 13.

20. Effective group skills.

Staff development, faculty meetings, and planning meetings are some of the groups in the school setting. Understanding how groups function enhances the effectiveness of the instructional supervisor. There are patterns to the behavior of groups and individuals within those groups. The dynamics of the interaction among group members must be clearly understood to plan and work productively in a group setting.

Miles, Matthew B. Learning to Work in Groups (2nd ed.).New York: Teachers College, Columbia University, 1981, Chapters 1 and 2.

Oliva, Peter F. Supervision for Today's Schools. New York: Harper and Row, 1976, Chapter 10.

Unruh, Adolph and Turner, Harold E. Supervision for Change and Innovation. Boston: Houghton Mifflin, 1970, Chapter IX.

21. The school as an organization.

Through organizational structures society orders human existence, manages and accommodates human needs and transmits values of the past. When institutional goals and human beings' needs conflict problems arise. Furthermore, in the school organization one finds isolation, formalization, preoccupation with efficiency, and status differential that can frustrate educational change. However, working to affect change in the human aspects of the school's organization will increase the school's effectiveness.

Alfonso, Robert J., Firth, Gerald R. and Neville, Richard F. Instructional Supervision: A Behavior System(2nd ed.). Boston: Allyn & Bacon, 1981, Chapter 11.

Lovell, John T. and Wiles, Kimball. Supervision for Better Schools (5th ed.). Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1983, pp.31-38.

Miles, Matthew B. "Unraveling the Mystery of Institutionalization." Educational Leadership 41(November 1983): 14-19.

Sarason, Seymour B. The Culture of the School and the Problem of Change. Boston: Allyn & Bacon, 1971, Chapters 2, 8, and 9.

Sergiovanni, Thomas J. and Starratt, Robert J. Supervision: Human Perspectives(2nd ed.). New York: McGraw-Hill, 1979, Chapter 3.

22. Setting goals.

Goal focus has been positively correlated with leadership effectiveness. A strong sense of direction for the organization, the leadership and the members is developed by all members of the organization knowing and understanding the goals and being committed to them.

Fairman, Marvin and Renne, Connie Lucas. "Sharpening the Focus on Goal Focus." Educational Leadership 40(February 1983): 28-30.

McGreal, Thomas L. "Helping Teachers Set Goals." Educational Leadership 37(February 1980): 414-419.

Sergiovanni, T.J. "Ten Principles of Quality Leadership." Educational Leadership 39(February 1982): 330-336.

23. Climate of the school.

Personality is to the individual what climate is to an organization. It includes such items as staff morale, the use of power and authority, and the amount of trust placed in the staff. The climate of the school can affect in large measure its effectiveness and have a positive effect on pupil attitudes and learning.

Halpin, Andrew W. and Croft, Donald B. Organizational Climate of Schools. Chicago: University of Chicago, Midwest Administration Center, 1963, pp. 131-249.

Kelley, Edgar A. "Auditing School Climate." Educational Leadership 39 (December 1981): 180-183.

Miles, Matthew. "Planned Change and Organizational Health: Figure and Ground." Change Processes in the Public Schools, Eugene: The University of Oregon, Center for the Advanced Study of Educational Administration, 1965, pp.11-34.

Miller, Stephen K. "School Learning Climate Improvement: A Case Study."Educational Leadership 40(December 1982): 36-37.

Miller, William C. "Staff Morale, School Climate and Educational Productivity." Educational Leadership 38(March 1981): 483-486.

Pajak, Edward F. and Seyforth, John T. "Authentic Supervision Reconciles the Irreconcilables." Educational Leadership 40(May 1983): 20-23.

Sergiovanni, Thomas J. and Starratt, Robert J. Supervision: Human Perspectives(2nd ed.). New York: McGraw-Hill, 1979, Chapter 4.

Squires, David A., Huitt, William G. and Segars, John K. Effective Schools and Classrooms: A Research-Based Perspective. Alexandria, VA: ASCD, 1983, Chapter 5.

HUMAN RESOURCES

24. Human potential.

Encouraging the human spirit and providing a fertile ground for growth is one of the most important tasks of the instructional supervisor. In understanding human potential and planning ways to develop it the supervisor also models the behavior the teacher will use with the students in the classroom. Strongly motivated teachers

and high staff morale do not happen by accident. Understanding of the concept of motivation and careful planning on the part of the instructional supervisor are determining factors in the development of an inspired and challenged staff.

Argyris, Chris. Reasoning, Learning, and Action: Individual and Organizational. San Francisco: Jossey-Bass, 1982, Chapter 9.

Combs, Arthur W., Avila. Donald L. and Purkey, William. Helping Relationships: Basic Concepts for the Helping Professions. Boston: Allyn and Bacon, 1971, Chapters 4 and 7.

Lovell, J.T. and Wiles, Kimball. Supervision for Better Schools. Englewood Cliffs, N.J.: Prentice-Hall, 1983, Chapter 3.

Maslow, Abraham. The Psychology of Being(2nd ed.). New York: D.Van Nostrand, 1968, Part II, "Growth and Motivation".

Sergiovanni, Thomas J. "Human Resources Supervision", Professional Supervision for Professional Teachers. Alexandria, VA: ASCD, 1975, pp.9-32.

Sergiovanni, Thomas J. and Starratt, Robert J. Supervision: Human Perspectives(2nd ed.). New York: McGraw-Hill, 1979, Chapter 8.

25. Teacher autonomy.

Effective supervision provides opportunities for the teacher to develop those skills that enable him or her to analyze, self-evaluate and then to design new strategies and continue professional growth. Teachers learn to manage their intellectual growth. Developing autonomy in teachers increases competency in the classroom. Supervision and evaluation is not something one does to a teacher, but is a process to improve teaching. As teachers become fuller partners in the enterprise of supervision and evaluation teaching is improved.

Alfonso, Robert J. and Goldsberry, Lee "Colleagueship in Supervision." Supervision of Teaching, 1982 Yearbook. Alexandria, VA: ASCD, 1982, pp.90-107.

Cogan, Morris L. Clinical Supervision. Boston: Houghton Mifflin, 1973, Chapters 5 and 6.

Cook, Ann and Mack, Herb. "The Teacher as Researcher." National Elementary School Principal 55(March-April 1976): 47-51.

Joyce, Bruce and Showers, Beverly."The Coaching of Teaching." Educational Leadership 40(October 1982): 4-10.

Manolakes, Theodore, "The Advisory System and Supervision." Professional Supervision for Professional Teachers. Alexandria, VA: ASCD, 1975, pp.51-64.

Oliver, Bernard. "Action Research for Inservice Training." Educational Leadership 37(February 1980): 394-395.

26. Staff development.

Staff development is a part of supervision growing out of the needs and discussions of the supervisor and the supervisee. Sergiovanni describes supervision as staff development. Effective programs are designed by teachers and supervisors together with clear goals in mind. Teachers play an important part in planning staff development to meet their needs and take a more active role by preparing and giving workshops and information sessions. Teachers sharing their first-hand information, experience and ideas with each other in both organized and informal sessions is an often overlooked, but tremendously effective resource for staff development.

Bunker, R. Mason. "Beyond Inservice: Toward Staff Renewal." Journal of Teacher Education XXVIII(April 1977): 31-34.

Dillon-Peterson, Betty(ed.). Staff Development/Organization Development. 1981 Yearbook, Alexandria, Va: ASCD, 1981.

Griffin, Gary A. "Implications of Research for Staff Development Programs." Elementary School Journal 83(March 1983): 414-425.

Educational Leadership 40(October 1982): Staff Development Theme Issue.

Lovell, J.T. and Wiles, Kimball. Supervision for Better Schools. Englewood Cliffs, N.J.: Prentice-Hall, 1983, Chapter 10.

Luke, Robert A. Teacher Centered In-Service Education: Planning and Products. Washington, D.C.: National Education Association, 1980.

Oliva, Peter F. Supervision for Today's Schools. New York: Harper and Row, 1976, Chapter 11.

Rubin, Louis J. "Case for Staff Development." Professional Supervision for Professional Teachers. Alexandria, VA: ASCD, 1975, pp.33-49.

Wood, Fred H. and Thomnpson, Steven R. "Guidelines for Better Staff Development", Educational Leadership 37(February 1980): 374-378.

Canizaro/Self-Evaluation Instrument

APPENDIX F

Code_____

SUPERVISOR EVALUATION INSTRUMENT

Use this form to evaluate your principal in his or her role as instructional supervisor. Indicate your response to each item by recording the appropriate letters on the line to the left of each item. Describe your principal's behavior as it is and neither overestimate nor underestimate it.

VW	The principal does this very well.
FW	The principal does this fairly well.
NI	This is not important to the principal.
B	The principal could do this better.
MB	The principal could do this much better.

_____1. A variety of data is collected by the principal during classroom observations.

_____2. The principal analyzes the data collected during classroom observations.

_____3. The principal is a skillful observer and knows the behavior and events to note when observing in my classroom.

_____4. The principal identifies behavior that discriminates against boys or girls, blacks, whites, or other racial and ethnic groups.

_____5. The principal is well prepared for the conferences with teachers and effectively uses conferencing skills.

_____6. The principal and I devise new teaching strategies together and the principal suggests resources to help me.

_____7. The principal asks for feedback on the conferences we have.

_____8. The principal sees the purpose of evaluation as improvement of teaching and professional growth.

Code_____

_____9. I receive meaningful and appropriate feedback about my teaching from my principal.

_____10. The principal helps me develop objectives for instruction when I need it.

_____11. The principal analyzes lesson plans for effective learning activities.

_____12. The principal effectively evaluates classroom instruction and helps me evaluate students.

_____13. The principal communicates effectively with the staff in our school.

_____14. The principal is a good listener.

_____15. The principal understands and identifies nonverbal communication.

_____16. The principal facilitates the resolution of conflicts that arise.

_____17. The principal is a strong and effective leader.

_____18. The principal responds to teachers in ways that are consistent with their individual needs and personalities.

_____19. Changes (improvements) in the school are facilitated by the principal.

_____20. The principal contributes to the staff working effectively together in a group.

_____21. The principal provides the setting for individuals' or teachers' needs to be integrated with those of the school.

_____22. The principal, working with the staff develops goals for our school that are clear to the staff, students and community.

Code_____

_____23. The principal develops an open climate by facilitating teachers' work, setting high expectations, being sensitive to feedback from the staff and treating teachers in a personal way.

_____24. The principal contributes to the development of high staff morale and strongly motivated teachers who are committed to our work at school.

_____25. The principal provides the circumstances for teachers in our school to continually become more able to independently analyze their teaching and develop new teaching strategies on their own.

_____26. The principal develops an effective staff development program with the teachers in our school.

INTERPRETING THE DATA

While studying the summary of your supervisees' responses identify important trends. Look for responses that stand out from the others because a particularly high or low number of supervisees responded in the same way.

Find areas which need improvement by looking at the Much Better (MB) and Better (B) responses. The percentage of these may not be large, but they may still indicate a trend.

Look for similar responses to questions for all or most of the elements in a cluster. These can indicate areas of strength and weakness. For example, if all or most of the items in the "Conferencing with Teachers" Cluster have been rated Very Well (VW) or Fairly Well (FW) by your staff and the items in the "Curriculum Implementation: Instruction" Cluster have several Better (B) and Much Better (MB) responses take a closer look at both Clusters. Analyze what you are doing that makes you effective in conferences; analyze what you might need to do in the area of curriculum in the classroom.

Notice items that supervisees responded to with a Not Important (NI). These items describe a perception your staff has of your behavior and it might be different from what you perceive. It could indicate areas that need improvement.

Compare your self-evaluation responses with the responses of your supervisees. Determine items on which there is strong agreement and those on which there is disagreement. Any discrepancies might indicate an area to be improved.

Discuss the results with your staff for more information on your strengths and areas needing improvement.

Remember that you are looking for trends in the responses and not necessarily percentages or numbers of responses.

APPENDIX G

Demographic Data Sheet

1. Identification code _____

2. Your role (circle one)

   teacher supervisor

3. Current instructional level (circle one)

   a. elementary b. middle/junior high c. high

4. Years in current role (circle one)

   0-5 6-10 11-15 16+

5. (teachers only) Years involvement with current supervisor (circle one)

   0-5 6-10 11-15 16+

6. Have you had formal clinical supervison training? (circle one)

   yes no

6a. If "yes", please specify (circle all that apply)

   a. consultant b. conference/workshop

   c. graduate course d. professional reading

7. Have you had formal situational leadership training? (circle one)

   yes no

7a. If "yes", please specify (circle all that apply)

   a. consultant b. conference/workshop

   c. graduate course d. professional reading

8. Please specify what you perceive to be your (for superviosr) or your supervior's (for teacher) dominant leadersh;ip style

   a. directing b. coaching c. supporting

   d. delegating e. a combination of a, b, c, and d

9. How many minutes did it take you to complete both instruments (cirle one)

   a. about 20 b. about 30 c. about 40

   d. more than 50

Thank you for helping me with my study. Remember to separately mail the enclosed post card if you would like to receive a summary of this study's results.

PLEASE MAIL IMMEDIATELY UPON COMPLETION

BIBLIOGRAPHY

Acheson, K. A. & Gall M. D. Techniques In The Clinical Supervision of Teachers. New York: Longman Inc., 1980.

Anderson, R. H. "Creating a Future for Supervision", In T. Sergiovanni (Ed), Supervision of Teaching. Alexandria, Virginia: Association for Supervision and Curriculum Development, 1982.

Anderson, R. H. & Krajewski, R. J. "Goldhammer's Clinical Supervision Model Decade Later," Educational Leadership, 32 (1980), pages 420-423.

Argyris, C. Personality and Organization. New York: Harper and Row Publishers, 1957.

Berman, P. & Mclaughlin, M .W. Federal Programs Supporting Educational Change. Volume 8. Implementating and Sustaining Innovation. Santa Monica, California: The Rand Corporation 1978.

Berne, E. Games People Play. New York: Grove Press, 1964.

Blanchard, K. H. A Situational Approach To Managing People. Escondido, California. Blanchard Training and Development, Inc., 1985.

Blanchard, K, Zigarmi, D, & Zigarmi, D. "Article For The N.A.E.S.P. Journal," Elementary Principal, unpublished.

Bloom, B. S. "New Views of the Learner: Implications for Instruction and Curriculum," Educational Leadership, 35 (1978) pages 563-575.

Blumberg, A. Supervisors and Teachers. Berkley, California: McCathan Publishing Co., 1974.

Brammer, L. M. The Helping Relationship. Englewood Cliffs, New Jersey: Prentice-Hall, Inc. 1973.

Brandt, R. "On Leadership and Student Achievement: A Conversation with Richard Andrews," Educational Leadership, 45 (1987), pages 9-17.

Brookover, W. B. Beamer, L. Efthim, H., Hathaway, D., Lezotte, L., Miller, S., Passalacqua, J., & Turnky, L. Creating Effective Schools. Holmes Beach, Florida: Learning Publications, Inc., 1982.

Bunker, R. M. "Beyond Inservice: Toward Staff Renewal," Journal of Teacher Education, 282 (March/April 1977), pages 31-34.

Canizaro, B. A Study of the Efficacy of Self Evaluation As A Means of Professional Growth For Instructional Supervisors. (Doctoral dissertation, University of Massachusetts, 1985).

Cogan, M. L. Clinical Supervision. Boston: Houghton Mifflin, 1973

Connecticut Association For Supervision and Curriculum Development. Instructional Leadership: The Role of the Principal. Southport, Connecticut: Report of the 1982-83 Study Commission, 1983.

Coombs, A. W., Arila, D. L., & Purkey, W. F., Helping Relationship. Allyn Bacon, 1985.

Deakin, W. E. An Analysis of Principals' Attitudes Towards Clinical Supervision As A Means For Enhancing Communication About Instructional Improvement. (Doctoral dissertation, University of Massachusetts, 1986).

DeBevoise, W. "Synthesis of the Research on the Prinicipal as Instructional Leader," Educational Leadership, 41 (1984), pages 14-20.

Duke, D. L. The Imperiled Profession. Albany, New York: State University of New York Press, 1984.

Dwyer, D. C. "The Search for Instructional Leadership - Routines and Subtleties of the Principal's Role," Educational Leadership, 41 (1984), pages 32-37.

Fuller, B., Wood, K., Rapoport, T, & Durnbusch, S. M. "The Organizational Context of Individual Efficacy," Review of Educational Research, 52 (1982), pages 7-30.

Garman, N. B. "The Clinical Approach to Supervision," In T. Sergiovanni (Ed), Supervision of Teaching. Alexandria, Virginia: Associaion for Supervision and Curriculum Development, 1982.

Glatthorn, A. A. Differentiated Supervision. Alexandria, Virginia. Association for Supervision and Curriculum Development, 1984.

Glickman, C. Developmental Supervision. Alexandria, Virginia: Association for Supervision and Curriculum Development, 1981.

Goldhammer, R. Clinical Supervision: Special Methods For the Supervision of Teachers. New York: Holt, Rinehart and Winston, 1969.

Goldhammer, R., Anderson R. H. & Krajewski, R. J. Clinical Supervision: Special Methods for the Supervision of Teachers. New York: Holt, Rinhart and Winston, 1980.

Goldsberry, L. F. "Reality - Really - A Response to McFaul and Cooper," Educational Leadership, 41 (1984), pages 10-11.

Goldsberry, L. F. "The Realities of Clinical Supervision," Educational Leadership, 41 (1984), pages 12-15.

Goldstein, W. Supervision Made Simple. Bloomington, Indiana: Phi Delta Kappa Educational Foundation, 1982.

Hall, G, Rutherford, W. L., Hood, S. M., & Huling, L. L. "Effects of Three Principal Styles on School Improvement," Educational Leadership, 41 (1984), pages 22-29.

Harris, B. M. Developmental Teacher Evaluation. Newton, MA: Allyn and Bacon, Inc. 1986.

Harris, T. I'm Ok - You're Ok: A Practical Guide to Transactional Analysis. New York: Harper and Row, Publishers 1969.

Hawley, R. C. Assessing Teacher Performance. Amherst, MA: Educational Research Associates, 1982.

Hersey, P. & Blanchard K. H. Management of Organizational Behavior: Utilizing Human Resources. Englewood Cliffs, New Jersey: Prentice Hall, Inc. 1982.

Herzberg, F. Work and The Nature of Man. New York: World Publishing Co., 1966.

Howell, B. "Profile of the Principalship," Educational Leadership, 38 (1981), pages 333-336.

Hunter, M. "Six Types of Supervisory Conferences," Educational Leadership, 37 (1980), pages 408-412.

Hunter, M. & Russell, D. Planning for Effective Instruction. Los Angeles: University Elementary School, 1980.

Kelly, E. A. Improving School Climate. Resont, Virginia. The National Association of Secondary School Principals, 1980.

Lickert, R. The Human Organization. New York: McGraw-Hill Book Company, 1967.

Lovell, J. & Wiles, K. Supervision For Better Schools. Englewood Cliffs, New Jersey: Prentice-Hall, Inc. 1983.

Maslow, A. Motivation and Personality. New York: Harper and Row, Publishers, 1954.

Mattaliano, A. P. Clinical Supervision: The Key Competencies Required for Effective Practice. (Doctoral dissertation, University of Massachusetts, 1977).

McClelland, D. C. The Achievement Motive. New York: Appleton-Century-Crofts, 1953.

McFaul, S. A. & Cooper, J. M. "Peer Clinical Supervision Theory Vs. Reality," Educational Leadership, 41 (1984), pages 4-9.

McGreal, T. L. Successful Teacher Evaluation. Alexandria, Virginia: Association for Supervision and Curriculum Development, 1983.

McGregor, D. The Human Side of Enterprise. New York: McGraw-Hill Book Company, 1960.

McNeil, J. D. "A Scientific Approach to Supervision," In T. Sergiovanni (Ed.), Supervision of Teaching. Alexandria, Virginia: Association for Supervision and Curriculum Development, 1982.

Merriam, Gard C. Webster's Seventh New Collegiate Dictionary; Chicago: Rand-McNally, 1969.

Peters, T. J. & Waterman, R. H. Jr. In Search of Excellence: Lessons from America's Best Run Companies. New York: Harper and Row, 1982.

Purkey, W. W. Self Concepts and School Achievement. Prentice Hall, 1970.

Reavis, C. H. "Research in Review/Clinical Supervision: A Review of the Research," Educational Leadership, 35 (1978), pages 580-584.

Robinson, G. Evaluating Teacher Performance. Arlington, Virginia: Educational Research Service, Inc., 1979.

Robinson, G. C. "Effective Schools Research: A Guide to School Improvement," Concerns in Education, February 1985, pages 1-32.

Reyers, C. R. On Becoming a Person. Boston, MA: Houghton Mifflin, 1961.

Scafidel, R. J. An Analysis of the Relationship Between Teachers: Perceived Leadership Style of the Principal and the Implementation of Continuous Progress. (Dissertation Abstracts International, 1982).

Sergiovanni, T. J. "Toward a Theory of Supervisory Practice: Integrating Scientific, Clinical and Artistic Views," In T. Sergiovanni (Ed.), Supervision of Teaching. Alexandria, Virginia: Association for Supervision and Curriculum Development, 1982.

Sergiovanni, T. J. "Leadership and Excellence in Schooling," Educational Leadership. 41 (1984), pages 4-13.

Sergiovanni, T. J. & Carver, F. D. The New School Executive. New York: McGraw-Hill Book Company, 1973.

Sergiovanni, T. J. & Starratt, R. J. Supervision: Human Perspectives (2nd ed.). New York: McGraw-Hill Book Company, 1979.

Sullivan, C. G. Clinical Supervision: A State of the Art Review. Alexandria, Virginia: Association for Supervision and Curriculum Development, 1980.

Valverde, L. A. "The Self Evolving Supervisor," In T. Sergiovanni (Ed.), Supervision of Teaching. Alexandria, Virginia: Association for Supervision and Curriculum Development, 1982.

Walter, J. E., Caldwell, S. D., & Marshall, J. "Evidence for the Validity of Situational Leadership Theory". Educational Leadership, (1980), pages 618-621.

Weller, R. H. Verbal Communication in Instructional Supervision. New York: Columvia University, Teacher's College Press. 1971.